



Center for Clinical Standards and Quality/Quality, Safety & Oversight Group

Medicare and Medicaid Notice to the Public

Notice is hereby given that on February 6, 2022 the Centers for Medicare & Medicaid Services (CMS) will terminate the agreement between the Secretary of Health and Human Services and Kingston Healthcare Center, LLC, Bakersfield, California as a skilled nursing facility in the Medicare program. In addition, as authorized by the California State Medicaid Agency, notice is given that the provider's agreement as a nursing facility in the Medicaid program will also be terminated effective February 6, 2022.

CMS has determined that Kingston Healthcare Center, LLC has failed to attain substantial compliance with multiple Medicare and Medicaid participation requirements, including:

- 42 CFR §483.10 Resident Rights
- 42 CFR §483.20 Resident Assessments
- 42 CFR §483.21 Comprehensive Resident Centered Care Plans
- 42 CFR §483.24 Quality of Life
- 42 CFR §483.25 Quality of Care
- 42 CFR §483.30 Physician Services
- 42 CFR §483.40 Behavioral Health Services
- 42 CFR §483.45 Pharmacy Services
- 42 CFR §483.50 Laboratory, Radiology, and Other Diagnostic Services
- 42 CFR §483.55 Dental Services
- 42 CFR §483.60 Food and Nutrition Services
- 42 CFR §483.70 Administration
- 42 CFR §483.75 Quality Assurance and Performance Improvement
- 42 CFR §483.80 Infection Control
- 42 CFR §483.95 Physical Environment

The facility's failures to comply with its participation requirements are more fully documented in 11 surveys completed in the last six months. The Medicare program will not make payment for skilled nursing facility services furnished to residents admitted to the facility on or after September 25, 2021. For residents admitted prior to September 25, 2021, payment may continue for up to 30 days of services on or after February 6, 2022, the date of termination.

In addition, Federal Financial Participation will not be available to the State for any Medicaid residents admitted to the facility on or after September 25, 2021. For Medicaid residents admitted prior to September 25, 2021, Federal Financial Participation may continue to be made to the State for up to 30 days of covered services to qualified residents furnished on or after February 6, 2022, the date of termination.

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