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CHAPTER 26: ICF/IID SERVICES

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**DECERTIFICATION****Termination of Certification of an Intermediate Care Facility for Individuals with Intellectual Disabilities**

An intermediate care facility for individuals with intellectual disabilities (ICF/IID) may voluntarily cease to participate in the Medicaid program or may involuntarily be terminated from the program.

**Reasons for Decertification of an ICF/IID**

An ICF/IID may be decertified for the following reasons:

1. The ICF/IID may voluntarily withdraw from the program for reasons of its own by having the owner and administrator submit a written notice of withdrawal to the Louisiana Department of Health (LDH) Health Standards Section (HSS) at least 60 days in advance;
2. A new owner may decide against participation in the program by submitting a written notice 60 days in advance to LDH HSS;
3. LDH may decertify an ICF/IID for failure to comply with Title XIX standards, thus canceling the facility's provider agreement;
4. LDH may decertify an ICF/IID if deficiencies pose immediate jeopardy to the beneficiary's health, safety, rights, or welfare;
5. The ICF/IID may allow its provider agreement to expire by submitting a written notice to LDH HSS at least 60 days in advance; or
6. LDH may cancel the provider agreement if and when it is determined that the ICF/IID is in material breach of the contract.

**Recertification of an Involuntarily Decertified ICF/IID**

After involuntary decertification, an ICF/IID cannot participate as a licensed medical assistance provider unless the following conditions are met:

1. Reasons for the decertification or nonrenewal of the contract no longer exist;

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2. Reasonable assurance exists that the factors causing the decertification will not recur;
3. The ICF/IID demonstrates compliance with the required standards for a 60-day period prior to reinstatement in a participating status; and
4. A professional medical review reports that beneficiaries are receiving proper care and services.

In the event an ICF/IID's license is revoked or renewal is denied, (other than for cessation of business or non-operational status) any owner, officer, member, director, manager, or administrator of such ICF/IID facility may be prohibited from opening, managing, directing, operating, or owning another ICF/IID facility for a period of two years from the date of the final disposition of the revocation or denial action.

**Examples of Situations Determined to Pose Immediate Jeopardy**

Listed below are examples of situations that may result in death, serious injury or directly threatens the health, safety, or welfare of a beneficiary or other situations adversely affecting beneficiaries that could result in sanctions. These examples are not intended to be all-inclusive. Other situations adversely affecting beneficiaries could constitute sufficient basis for the imposition of sanctions.

**1. Poisonous Substances**

Failure of an ICF/IID to provide proper storage of poisonous substances.

**2. Falls**

Failure of an ICF/IID to maintain required direct care staffing and/or a safe environment as set forth in the regulations such as equipment not being properly maintained or personnel not responding to a beneficiary's request for assistance.

**3. Assaults**

Failure of an ICF/IID to maintain required direct care staffing and to take measures when it is known that a beneficiary is combative and assaultive to other beneficiaries, or the ICF/IID fails to take corrective action against an employee who has a history of beneficiary abuse and assaults a beneficiary.

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4. **Physical Restraints Resulting in Permanent Injury**

Failure of an ICF/IID employee to properly apply physical restraints contrary to published regulations or failure to check and release restraints as directed by regulations or physician's written instructions.

5. **Control of Infections**

Failure of an ICF/IID to follow or meet infection control standards as ordered in writing by the physician.

6. **Medical Care**

- a. Failure of an ICF/IID to secure proper medical assistance for a beneficiary.
- b. Failure of an ICF/IID to inform a physician when a beneficiary's condition has declined. This includes the following:
  - i. Failure to follow up on unusual occurrences of negative findings;
  - ii. Failure to obtain information regarding appropriate care before and after a beneficiary's hospitalization; and
  - iii. Failure to timely hospitalize a beneficiary during a serious illness.
- c. Failure of an ICF/IID to follow written physician's orders. This includes failure to fill prescriptions timely.

7. **Medications**

Failure of an ICF/IID to properly store and distribute medications. This would include the following:

- a. Knowingly withholding a beneficiary's medications;

**NOTE:** The beneficiary **does** have the right to refuse medications. Such refusal *must be documented* in the beneficiary's record and *brought to the attention of the physician and interdisciplinary team (IDT)*.

- b. Omitting medications without justification;

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- c. Excessive medication errors; and
- d. Improperly storing narcotics or other prescribed drugs, mishandling of drugs or other pharmaceutical problems.

**8. Improper Treatments**

An ICF/IID employee knowingly does the following:

- a. Performs treatment contrary to a physician's order;
- b. Fails to feed beneficiaries who are unable to feed themselves as set forth in physician's instructions;
- c. Fails to obtain a physician's order for use of chemical or physical restraints; or
- d. Fails to check and release physical restraints as specified in state regulations.

**9. Natural Disaster/Fire**

Failure of an ICF/IID to train its staff members in disaster/fire procedures as required for licensing or failure to meet staffing requirements.

**10. Decubitus Ulcers**

Failure of an ICF/IID to follow decubitus ulcer care measures in accordance with a physician's written orders.

**11. Elopement**

Failure of an ICF/IID to provide necessary supervision of its beneficiaries or take measures to prevent a beneficiary with a history of elopement problems from wandering away. Examples of preventative measures include, but are not limited to the following:

- a. Documentation that the elopement problem has been discussed with the beneficiary's family IDT; and

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- b. Personnel have been trained to make additional efforts to monitor these beneficiaries.

**12. Environment/Temperature**

Failure of an ICF/IID to reasonably maintain its temperature control system as required by regulations. Isolated incidents of breakdown or power failure will not be considered immediate jeopardy.

**13. Life Safety**

An ICF/IID knowingly fails to maintain the required Life Safety code system such as:

- a. Properly functioning sprinklers, fire alarms, smoke sensors, fire doors, electrical wiring;
- b. The practice of fire or emergency evacuation plans; or
- c. Stairways, hallways and exits are kept free from obstruction.

**14. Staffing**

Consistent failure of an ICF/IID to maintain minimum staffing. Isolated incidents where the facility does not maintain staffing due to personnel calling in sick or other emergencies are excluded. However, the ICF-DD shall have policies and procedures to ensure a plan is in place for back-up staffing for the provision of sufficient care and services.

**15. Dietary Services**

Failure of an ICF/IID to follow the minimum dietary needs or special dietary needs as ordered by a physician. The special diets must be prepared in accordance with physician's orders or a diet manual approved by the American Dietary Association.

**16. Sanitation**

Failure of an ICF/IID to adhere to state and federal sanitation regulations. The following are examples of poor sanitation:

- a. Strong odors linked to a lack of cleanliness;

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- b. Dirty buildup on floors and walls;
- c. Dirty utensils, glasses and flatware; and
- d. Insect or rodent infestation.

**17. Equipment and Supplies**

Failure of an ICF/IID to provide equipment and supplies authorized in writing by a physician as necessary for a beneficiary's care.

**18. Beneficiary Rights**

An ICF/IID violates beneficiary's rights and such violations result in the beneficiary's distress to such an extent that their psychosocial functions are impaired, or such violations directly threaten their psychosocial functioning. This includes the following:

- a. Psychological abuse;
- b. Use of corporal punishment;
- c. Allowance of the following responses to beneficiaries by staff members and employment supervisors:
  - i. Physical exercise or repeated physical motions;
  - ii. Excessive denial of usual services;
  - iii. Any type of physical hitting or other painful physical contacts except as required by medical, dental, or first aid procedures necessary to preserve the beneficiary's life or health;
  - iv. Requiring the beneficiary to take on an extremely uncomfortable position;
  - v. Verbal abuse, ridicule, or humiliation;
  - vi. Requiring the beneficiary to remain silent for a long period of time;
  - vii. Denial of shelter, warmth, clothing or bedding; or

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- viii. Assignment of harsh physical work.
- d. Failure of an ICF/IID to afford the beneficiary with the opportunity to attend religious services;
- e. Denial of a beneficiary's meal without a doctor's order; and
- f. Failure of an ICF/IID to afford the beneficiary with suitable supervised opportunities for interaction with members of the opposite sex, except where a qualified professional responsible for the formulation of a particular individual's treatment/habilitation plan writes an order to the contrary and explains the reasons.

**The secretary of LDH has the final authority to determine what constitutes "immediate jeopardy" or serious threat.**