DEPARTMENT OF HEALTH & HUMAN SERVICES

Centers for Medicare & Medicaid Services San Francisco Survey and Enforcement Division Survey Operations Group 90 7th Street, Suite 5-300 (5W) San Francisco, CA 94103-6707



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

Medicare and Medicaid Notice to the Public

Notice is hereby given that on February 12, 2022 the Centers for Medicare & Medicaid Services (CMS) will terminate the agreement between the Secretary of Health and Human Services and Aloha Nursing & Rehab Centre, Kaneohe, Hawaii as a skilled nursing facility in the Medicare program. In addition, as authorized by the Hawaii 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 12, 2022.

CMS has determined that Aloha Nursing Home & Rehab Centre has failed to attain substantial compliance with the following Medicare and Medicaid participation requirements:

- 42 CFR §483.73(d)(1) Emergency Preparedness Training Program (E006)
- NFPA 101 Doors with Self-Closing Devices (K223)
- NFPA 101 Construction, Repair, and Improvement Operations (K791)

The Medicare program will not make payment for skilled nursing facility services furnished to residents admitted to the facility on or after November 6, 2021. For residents admitted prior to November 6, 2021, payment may continue for up to 30 days of services on or after February 12, 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 November 6, 2021. For Medicaid residents admitted prior to November 6, 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 12, 2022, the date of termination.

This action is mandated by Sections 1819(h)(2)(C) of the Social Security Act and Federal regulations at 42 CFR §488.412 and 488.456. If the provider demonstrates substantial compliance with all CMS requirements, and a revisit survey confirms substantial compliance, prior to February 12, 2022, the provider will remain active in the Medicare Program and CMS will not terminate their provider agreement.

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