

DEPARTMENT OF HEALTH & HUMAN SERVICES
Centers for Medicare & Medicaid Services
Dallas Regional Office
1301 Young Street, Room 827
Dallas, Texas 75202



DIVISION OF SURVEY AND CERTIFICATION, REGION VI

November 1, 2017

Our Reference: CCN 454140, Intake #TX00271526

James Miller, CEO
Timberlawn Mental Health System
4600 Samuell Blvd
Dallas, TX 75228

Dear Mr. Miller:

Section 1865 of the Social Security Act (the Act) and Centers for Medicare & Medicaid Services (CMS) regulations provide that a provider entity accredited by a CMS-approved Medicare accrediting organization will be "deemed" to meet all of the applicable Medicare conditions and requirements.

Section 1864 of the Act requires the State Agency to conduct a survey of a deemed hospital on a selective sampling basis, in response to a substantial allegation of noncompliance, or when CMS determines that a full survey is required after a substantial allegation survey identifies substantial noncompliance. CMS uses such surveys as a means of validating the accrediting organization's survey and accreditation process.

We have reviewed the October 19, 2017, survey report and determined that Timberlawn Mental Health System no longer meets the requirements for participation in the Medicare program because of deficiencies that represent **immediate jeopardy** to patient health and safety. Enclosed is the form CMS-2567 with the findings that show the following Medicare Conditions of Participation were out of compliance:

42 CFR 482.12 Governing Body
42 CFR 482.13 Patient Rights
42 CFR 482.23 Nursing Services

Psychiatric hospitals must meet all provisions of Section 1861(e) and (f) of the Social Security Act, be in compliance with each of the applicable Medicare Conditions of Participation, and be free of hazard to patient health and safety in order to participate as providers of services in the Medicare program. The deemed status of your hospital was removed on November 1, 2017.

Unless the immediate jeopardy to patient health and safety is removed, the Medicare agreement of your hospital will be terminated on **November 24, 2017**. Termination can only be averted by correction of the deficiencies, through submission of acceptable plans of correction (PoC) and subsequent verification of compliance by the Texas Health and Human Services Commission (HHSC).

You must send acceptable plans of correction to **Shannon Sisco, HHSC, via email at Shannon.Sisco@hhsc.state.tx.us by November 6, 2017**, in order to ensure a timely revisit.

The criteria for acceptable plan of correction are as follows:

1. The plan for correcting the specific deficiency cited;
2. The plan for improving the processes that lead to the deficiency cited, including how the hospital is addressing improvements in its systems in order to prevent the likelihood of recurrence of the deficient practice;
3. The procedures for implementing the acceptable plans of correction for each deficiency cited;
4. A completion date for the implementation of the plans of correction for each deficiency cited;
5. The monitoring and tracking procedures that will be implemented to ensure that the plan of correction is effective and the specific deficiency cited remain corrected and in compliance with regulatory requirements; and
6. The title of the person responsible for implementing the acceptable plan of correction.

The completion date for your corrective action can be no later than **November 16, 2017**.

Copies of the Form CMS-2567, including copies containing the hospital's PoC, are releasable to the public in accordance with the provisions of Section 1864(a) of the Act and 42 CFR 401.133(a). As such, the PoC should not contain personal identifiers, such as patient names, and you may wish to avoid the use of staff names. However, it must be specific as to what corrective action the hospital will take to achieve compliance.

If the immediate jeopardy situations are not abated at the time of the revisit, or you fail to submit acceptable plans of correction, you will receive a notice from our office advising you of your termination and your appeal rights.

You may contact Dodjie Guioa at 214-767-6179 or by email at dodjie.guioa@cms.hhs.gov, if you have questions regarding this matter.

Sincerely,

Ginger Odle, Manager
Enforcement Branch

Enclosure: CMS-2567

cc: Accrediting Organization, HHSC