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**Center for Clinical Standards and Quality**

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**Admin Info: 24-17-PRTF**

**DATE:** July 12, 2024

**TO:** State Survey Agency Directors

**FROM:** Directors, Quality, Safety & Oversight Group (QSOG) and Survey & Operations Group (SOG)

**SUBJECT:** Psychiatric Residential Treatment Facility (PRTF) Self-Attestation of Compliance with Restraint and Seclusion Standards and Provider Agreement Validation for Certification and Recertification

**Memorandum Summary**

- **PRTFs are required to complete a self-attestation and provider agreement-** To obtain compliance with §483.374(a) and §483.374(a)(1)-(2), each certified PRTF must submit an attestation to the State Medicaid Agency (SMA) and have an active provider agreement with the SMA.
- **State Survey Agency (SA) PRTF self-attestation validation** – In accordance with the State Operations Manual (SOM), SAs are required to validate and input a certified PRTF’s self-attestation into CMS’ survey documentation system at the time of recertification.
- **SA PRTF provider agreement validation-** CMS is now requiring SAs to validate and input a certified PRTF’s active provider agreement with the SMA into the survey documentation system at the time of a recertification survey.

**Background:**

A PRTF is Medicaid-certified if it meets the requirements at [42 CFR Part 441 Subpart D](#) - Inpatient Psychiatric Services for Individuals Under Age 21 in Psychiatric Facilities or Programs (incorporating other requirements by reference, including those at [42 CFR Part 483 Subpart G](#) - Condition of Participation for the Use of Restraint or Seclusion in PRTFs Providing Inpatient Psychiatric Services for Individuals Under Age 21). [42 CFR 483.374\(a\)\(1\)](#) requires each PRTF facility with a **provider agreement** with the SMA, to provide the SMA its **attestation of compliance** with CMS’ restraint and seclusion standards. A facility subsequently enrolling as a Medicaid provider must meet the requirement at the time it executes a provider agreement with the SMA by submitting an attestation at that time, as referenced in [42 CFR 483.374\(a\)\(2\)](#). The facility director must sign the attestation. The facility must submit a new attestation if the facility director changes. Please refer to the [State Operations Manual \(SOM\) Appendix N](#) -

Psychiatric Residential Treatment Facilities (PRTF) Interpretive Guidance and [SOM Chapter 2](#), Section 2832A for further information on these requirements.

**Discussion:**

During recertification surveys of PRTFs, SAs have found that some facilities do not have evidence of an attestation submitted to the SMA and/or an active provider agreement with the SMA. CMS wants to ensure SAs have access to these required documents as part of the pre-survey process.

CMS survey activities of PRTFs follow the [Mission & Priorities document](#), which does not require an on-site initial survey as eligible facilities are expected to be accredited ([42 CFR 441.151\(a\)\(2\)\(ii\)](#)), provide their attestation and provider agreement, and be in full compliance with CMS requirements. While not a federal requirement, some states may require an initial survey. The provider agreement with the SMA must be entered into the survey documentation system prior to an initial survey (if an initial survey is applicable, based on state requirements) or at the time of a recertification survey if not available in the survey documentation system. As part of the current recertification process, and in accordance with the SOM Chapter 2, Section 2832A – Attestations, the SA surveying the PRTF inputs the attestation information into the survey documentation system. CMS is now also requiring the SA to input the PRTF provider agreement with the SMA attestation into the survey documentation system.

The SA can obtain an attestation or provider agreement at any time prior to the next survey. The SA will need to follow its established process (e.g., contacting the SMA or PRTF) to receive the attestation and now, the provider agreement, for input into the survey documentation system in accordance with the process defined in SOM Chapter 2, Section 2832D. If a PRTF does not have an attestation or SMA provider agreement, then the SA will need to follow the guidance under SOM Chapter 2, Section 2832E.2, to notify the SMA and CMS Location/CMCS division to determine next steps based on non-compliance with the certification requirements.

This process is designed to save the survey team resources and avoid potential confusion regarding non-compliance with certification requirements for a PRTF that does not have an attestation and/or SMA provider agreement. Each PRTF should have evidence of their self-attestation and provider agreement status with the SMA.

**Contact:**

For questions or concerns relating to this memorandum, please contact [QSOG\\_PRTF@cms.hhs.gov](mailto:QSOG_PRTF@cms.hhs.gov).

**Effective Date:**

Immediately. Please communicate to all appropriate staff within 30 days.

/s/

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**Resources to Improve Quality of Care:**

*Check out CMS' new Quality in Focus interactive video series. The series of 10–15 minute videos are tailored to specific provider types and intended to reduce the deficiencies most commonly cited during the CMS survey process, like infection control and accident prevention. Reducing these common deficiencies increases the quality of care for people with Medicare and Medicaid.*

*Learn to:*

- *Understand surveyor evaluation criteria*
- *Recognize deficiencies*
- *Incorporate solutions into your facility's standards of care*

*See the [Quality, Safety, & Education Portal Training Catalog](#), and select Quality in Focus.*

*Get guidance memos issued by the Quality, Safety and Oversight Group by going to [CMS.gov](#) page and entering your email to sign up. Check the box next to “CCSQ Policy, Administrative, and Safety Special Alert Memorandums” to be notified when we release a memo.*