# Guide to 2027 Inspections

Division of Provider Services & Quality Assurance (DPSQA)

ARKANSAS DEPARTMENT OF HUMAN SERVICES

# Licensure and Certification Services Current Status

- The current contract with AFMC has an end date of December 31, 2026. As a new vendor contract has not been awarded and approved, AFMC will continue to conduct inspections.
- Once a contract has been awarded and approved, DPSQA will communicate with all providers through a memorandum which will be issued to the provider email address on file in ELS.
- We will have a transition period where AFMC will continue to conduct inspections, but DPSQA staff and the new vendor staff will also attend inspections. This is to allow the vendor to meet facility staff, observe current inspections, and build a rapport with facilities.
- Providers should expect coordinated communication between the awardee, AFMC, and DPSQA.

# Survey Expectations

Surveyors will evaluate compliance with the applicable provider manual, Medicaid requirements, waiver assurances, and state and federal requirements. Reviews are generally conducted item by item against the applicable rules.

1

**Entrance Conference**

Providers should be prepared to provide surveyors with timely access to facilities.

2

**Physical Setting**

Survey team will review the physical setting.

3

**Document & Record Review**

The expectation is that documentation will be reviewed and collected on-site.

4

**Staff & Client Interviews**

Providers should ensure that appropriate staff are available for questions as well as clients, if requested.

5

**Exit Conference**

At the end of the review, the survey team will explain next steps and prepare documentation of its findings.



**Key Takeaway:** If access or necessary documentation is refused, the surveyor will contact DPSQA while still on-site for direction.

# Deficiencies & Plans of Correction

The vendor will provide a written or electronic report of deficiency findings to the Provider within ten (10) calendar days of the on-site review. For PRTFs, the deficiencies will be made available in iQIES. The Provider will be required to complete a plan of corrections (POC).

Address each specific deficiency and the processes that lead to the deficiency **+** Procedure for implementing the acceptable POC for the specific deficiency **+** Monitoring procedure to ensure that the POC is effective and that the specific deficiency remains corrected **+** Name and title of the person responsible for implementing the POC **=** Acceptable POC

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**Note:** In the case that the is a class violation or a CMP is imposed, DPSQA will communicate enforcement action.



# Questions



# We care. We act. We change lives.




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