

Q&A FOR COMPLAINTS



Regarding Organizations with Deemed Status Accreditation



Q: What is deemed status?

A: Deemed status is accreditation that comes with a recommendation for new or continuing Medicare certification that allows the organization to bill CMS for reimbursement related to care and materials provided to Medicare/Medicaid beneficiaries.

ACHC holds deeming authority for [acute care hospitals](#), [ambulatory surgery centers](#), [critical access hospitals](#), [DMEPOS](#), [home health](#), [home infusion therapy](#), [hospice](#), [laboratory](#), and [renal dialysis](#). This federal guidance applies to accreditation for all of these programs except laboratory and DMEPOS.

Q: Under what circumstances can deemed status be removed?

A: Temporary replacement of an organization's deemed status accreditation with state agency (SA) oversight could occur based on condition-level noncompliance noted by a state or federal team during a validation survey or while investigating a complaint.

Q: What happens if my organization is under SA jurisdiction and also due for a reaccreditation survey in the near future?

A: Accrediting organizations (AO) are not permitted to conduct deemed status surveys while an organization is under state agency oversight. There are two potential scenarios:

1. An organization's term of accreditation ends January 15, 2027. It is placed under SA jurisdiction in October 2026 and deemed status is restored in November 2026. ACHC will conduct the renewal survey prior to expiration and accreditation will be continuous.
2. An organization's term of accreditation ends January 15, 2027. It is placed under SA jurisdiction in October 2026, and accreditation is not restored until late January. ACHC will conduct the renewal survey within 90 days of the restoration of deemed status and the term of accreditation will reflect a new start date rather than a continuation of the previous term.

Q: What if my organization is in a state that mandates accreditation or has payor contracts that mandate accreditation and we are placed under SA jurisdiction?

A: ACHC has developed a non-deemed bridge accreditation that will provide six months (renewable) of non-deemed accreditation to support eligible* organizations that need to meet other, non-federal requirements. Contact your Account Advisor for more information.

Q: What is the process for complaint investigations?

A: For organizations under SA jurisdiction, all complaints must be reviewed by the SA, regardless of whether they are initially submitted to that agency or to the AO. The SA will triage and determine whether it will investigate directly or pass the complaint back to the AO for investigation once deemed status is restored.

For organizations that are NOT under temporary SA jurisdiction, if a complaint is made to both the AO and the SA, the state agency will determine the triage level. IJ or Non-IJ High issues will be investigated by the SA. Other triage levels will be assigned by the SA.

If a complaint is made **ONLY** to the AO for an organization that is NOT under SA jurisdiction, the AO will conduct the triage. IJ-level complaints will be handed over to the SA for investigation. All other complaints may be managed by the AO, acting within established CMS time frames.

*Eligibility is tied to the scope and severity of the noncompliance that resulted in temporary suspension of deemed status, as determined by ACHC.