

CMS Final Rule on Oversight of Accrediting Organizations

On June 16, 2026, CMS published a final rule with comment period. **Strengthening Oversight of Accrediting Organizations (AOs) and Preventing AO Conflicts of Interest, and Related Provisions** announces changes to become effective June 16, 2027. The comment period is open until August 17, 2026.

Overall, the final rule presents very little that has not been previously communicated to AOs with deeming authority for CMS programs and there is very little impact on ACHC-accredited organizations. Below are aspects of the final rule that may touch on the accreditation experience.

- **Unannounced survey** is defined to mean a survey conducted without any prior notice of any type, through any means of communication or forums, to the facility to be surveyed, and therefore, is unexpected to the facility until the arrival onsite by surveyors. This also means that the accrediting organizations must schedule their surveys so that the facility is unable to predict when they will be performed. *This has always been true for ACHC.*
- **Strengthening Conflict of Interest policies:** CMS is requiring that AOs strengthen their COI policies to ensure that AO owners, surveyors, or other employees who have an interest in or financial relationship with a healthcare facility being accredited by the AO will be prohibited from activities such as participating in or having input into the survey of that healthcare facility, having involvement with any pre- or post-survey activities, or having contact with or access to the records for the survey and accreditation of that healthcare facility. In this rule, CMS defines ‘interest in or relationship’ a healthcare facility that may be a conflict of interest. CMS also adds a definition of immediate family member in this section. *ACHC will expand COI policies to include all programs.*
- **Fee-based consulting restrictions:** AOs will be required to have strong COI and firewall policies and will have restrictions on when it may provide fee-based consulting to accreditation customers. CMS has added a definition for fee-based consulting to mean ‘services provided by an accrediting organization (AO), or its consulting division or separate business entity (such as a company or corporation) that provides such services, for the review of a [particular] facility’s standards, processes, policies, and functions for compliance with the AO’s standards and the Medicare requirements through simulation of a real survey, such as a mock survey, with comprehensive

written reports of findings and early intervention and action to correct deficiencies prior to an actual accreditation survey.’ AOs will be restricted from providing fee-based consulting services at any time prior to an initial survey with that AO through the time of completion of all survey activities are completed and during the last 12 months of the accreditation cycle. Additionally, AOs would not be able to provide fee-based consulting services in response to a complaint received by the AO. Providers would be able to seek consulting services from third-party consultants during the periods of restriction. *ACHC is seeking confirmation that the restriction applies only to fee-based consulting services focused on practices, policies, and procedures applicable to a specific organization.*

- **Requiring AOs to use Medicare Standards and Strengthened Survey Process Compatibility:** AOs will be required to ensure that AO standards include the applicable Medicare regulatory language as their minimum accreditation standards. AOs are still free to establish additional standards and requirements that exceed the Medicare conditions. Additionally, AOs must utilize a comparable survey process used by the State Agencies. *This is already in place for ACHC programs.*
- **Updated AO Application Documentation Requirements:** CMS has updated the list of required documentation the AO will provide during the application and reapplication process with CMS. These updates will look familiar to AOs who have deemed HH, HSP, and DMEPOS programs as many of these changes had already been outlined and implemented in specific programs with prior rulemaking. *This is already in place for ACHC programs.*
- **Revisions to AO Survey Validation Program:** In this final rule, CMS is removing language referencing ‘look-back’ validation surveys and will proceed with only direct observation validation surveys. This means that providers chosen for a validation survey will have a representative of CMS (either a CMS contract surveyor or State Agency surveyor) that directly observes the AO surveyor during the survey process. *DOVS surveys are already in practice.*
- **Limitations on Terminated Deemed Providers/Suppliers Seeking Re-entry into Medicare/Medicaid Program:** AOs would be required to terminate the accreditation of providers/suppliers who have been involuntarily terminated from the Medicare program by CMS. AOs would need to complete such termination within 5 days of notification by CMS of the involuntary termination. During that time period, the agency would be under the jurisdiction of the State Agency until such time that CMS feels the provider/supplier has demonstrated compliance for a reasonable assurance period (as determined by CMS) when seeking re-entry into the Medicare program. *This became effective in March 2026.*

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- **Psychiatric Hospital Survey Process:** CMS is consolidating the psychiatric hospital survey process with the existing acute care hospital survey process. AOs with approved hospital programs will need to include standards, survey processes, etc. to CMS for approval. *ACHC-accredited acute care hospitals will be able to receive psychiatric deemed accreditation at the same time as their hospital accreditation.*
- **ESRD Technical Correction and Transplant Programs:** CMS is codifying statutory changes made in 2018 that allowed for dialysis facilities to participate in Medicare via CMS-approved accreditation programs. CMS is also removing language that has prevented AOs from seeking approval for transplant centers. *This is already in practice.*

External links:

[CMS summary](#)

[Final Rule as published in the Federal Register](#) (This is where you can find information about how to submit electronic or written comments. The comment period is open until August 17, 2026)