



Ref: Brynn Marr Hospital CCN: 344016

IMPORTANT NOTICE – PLEASE READ CAREFULLY
SENT VIA INTERNET EMAIL TO

Cynthia.Waun@uhsinc.com

(Receipt of this notice is presumed to be March 27, 2023 – date notice e-mailed)

March 27, 2023

Ms. Cynthia Waun, CEO
Brynn Marr Hospital
192 Village Drive
Jacksonville, NC 28540

Dear Ms. Waun:

Institutions accredited as hospitals by the Joint Commission (JC) are deemed to meet all of the Medicare Conditions of Participation for hospitals, with the exception of utilization review. Section 1864 of the Social Security Act authorizes the Secretary of Health and Human Services to conduct surveys of accredited hospitals participating in the Medicare program if there are “substantial allegations” indicating serious deficiencies that could potentially affect the health and safety of patients.

The North Carolina Agency for Health Care Administration (HCA) conducted a complaint survey at Brynn Marr Hospital on February 6, 2023. HCA identified immediate jeopardy and notified the facility. Healthcare Management Solutions, LLC (HMS) conducted a revisit survey on March 20, 2023. As a result of the revisit survey, the immediate jeopardy was removed and Brynn Marr Hospital continues to remain not in compliance with all the Conditions of Participation for hospitals. A copy of the deficiencies cited during this survey is enclosed. Specifically, the facility does not meet the following Conditions of Participation:

- 482.12 Governing Body
- 482.13 Patient Rights
- 482.21 Quality Assessment and Performance Improvement
- 482.23 Nursing Services

As a result of this survey visit, the Centers for Medicare and Medicaid Services (CMS) Atlanta Location must proceed with a termination action effective **June 2, 2023** if the hospital does not achieve compliance. When a hospital, regardless of its accreditation status, is found to be out of compliance with one or more Conditions of Participation, a determination must be made that the facility no longer meets the requirements for participation as a provider of services in the Medicare program. Such a determination had been made in the case of Brynn Marr Hospital and, accordingly, the Medicare provider agreement between Brynn Marr Hospital and the Secretary of the Department of Health and

Human Services may be terminated. This termination will be effective **June 2, 2023** if the hospital does not achieve compliance.

The Medicare program will not make payment for inpatient hospital services furnished to patients who are admitted on or after **June 2, 2023**. For patients admitted prior to **June 2, 2023**, payment may continue to be made for a maximum of 30 days for inpatient hospital services furnished on or after **June 2, 2023**. If your hospital does not achieve compliance, you should submit as soon as possible, a list of names and Medicare claim numbers of beneficiaries in your hospital on **June 2, 2023**, to your fiscal intermediary to facilitate payment for these individuals.

We will publish a public notice prior to the termination date on CMS.gov. Termination can only be averted by correction of these deficiencies **June 2, 2023**. Should we not hear from you, we will assume that the situation has not been corrected. If you believe that compliance has been achieved, you should notify CMS-Atlanta Location and the North Carolina State Agency in writing on or before **April 6, 2023**, describing in detail the specific corrective measures taken to resolve these problems and include acceptable completion dates. An acceptable plan of correction must contain the following elements:

- 1) The plan of correcting the specific deficiency cited. The plan should address the processes that lead to the deficiency cited;
- 2) The procedure for implementing the acceptable plan of correction for the specific deficiency cited;
- 3) The monitoring procedure to ensure that the plan of correction is effective and that specific deficiency cited remains corrected and/or in compliance with the regulatory requirements;
- 4) The title of the person responsible for implementing the acceptable plan of correction.

If your plan of correction is accepted, North Carolina State Agency will conduct a revisit to determine if the Medicare Conditions of Participation are back into compliance. Please be advised, however, that failure to come into compliance with the Conditions of Participation will result in your hospital's termination under Medicare, effective **June 2, 2023**. If the Centers for Medicare & Medicaid Services determine that the reasons for termination remain, the effective date of the termination remains **June 2, 2023**, and you will be so informed in writing. If corrections have been made, the termination procedures will be halted, and you will be notified in writing.

If there are any questions, please contact Doris Wallace at (404) 562-4027 or by email at doris.wallace@cms.hhs.gov.

Sincerely,



Melissa Foreman, RN, CCM, CPHQ
Acute & Continuing Care Branch Manager
Atlanta Survey & Enforcement Division
Center for Clinical Standards and Quality (CCSQ)

Enclosures:
2567

cc: North Carolina State Agency
Joint Commission