

**Enforcement of Compliance for Nursing Facilities**

Directed Plan of Correction: Describe the criteria (as required at §1919(h)(2)(A)) for applying the remedy.

Specified Remedy

(Will use the criteria and Notice Requirements specified in the regulation.)

Alternative Remedy

Describe the criteria and demonstrate that the alternative is as effective in deterring Non-compliance. Notice requirements are as specified in the regulations

TN No.	LA-18-009
Supersedes TN #	<u>MS-96-8</u>

Effective	7-1-18
Approved	<u>8-24-18</u>