

January 21, 2025

AFL 25-02

**TO:** Skilled Nursing Facilities (SNFs)

**SUBJECT:** Suspension of Regulatory Enforcement of Specified Skilled Nursing Facility Requirements for 2025 Southern California Fires

**AUTHORITY:** Proclamation of State of Emergency (PDF)  
Executive Order N-2-25 (PDF)

### All Facilities Letter (AFL) Summary

- This AFL notifies skilled nursing facilities (SNFs) of a temporary waiver of specified regulatory requirements due to the state of emergency related to the Los Angeles and Ventura counties fires and windstorm conditions.
- This waiver is valid until March 31, 2025, and is only applicable to SNFs located in the Los Angeles and Ventura Counties.

Pursuant to the Governor's Executive Order N-2-25 (PDF) related to the Los Angeles and Ventura counties fires and windstorm conditions state of emergency, the Director of the California Department of Public Health (CDPH) may waive any of the licensing requirements of Chapters 1, 2, 8, and 8.5 of Division 2 of the Health and Safety Code and accompanying regulations with respect to any hospital, clinic, other health facility, home health agency, or hospice agency identified in Health and Safety Code sections 1200, 1250, 1727 or 1746. CDPH is temporarily waiving specified SNF licensing requirements and suspending regulatory enforcement of the following requirements:

## Licensure

Title 22 California Code of Regulations (CCR) section 72201

A SNF that has submitted an application for any of the following may begin providing care prior to obtaining approval and licensure by CDPH:

- Change of Beds
- Change of Services

For capacity tracking purposes during the fires and windstorms, SNFs must submit an application when changing beds or services listed on their license. This shall not require approval of the application before the SNF may provide care; however, the facility needs to notify CDPH, as soon as reasonably feasible, of their plan for services and staffing to ensure patient safety and the quality of care.

## Space

Title 22 CCR section 72603 and section 72607

SNFs may convert the use of existing space and use additional space, including surge tents, to allow additional patients access to care. This may include setting up additional beds in areas not traditionally used for patient rooms. Any beds added for temporarily use must ensure patient privacy.

## Staffing

Only those SNFs experiencing a fire and windstorm related surge of patients or staffing shortages resulting from fire or windstorm impacts, including, school closures, or an emergency such as a public safety power shutoff, may request a staffing waiver. A SNF seeking a staffing waiver must submit a program flexibility and supporting documentation on the Risk and Safety Solutions (RSS) website. SNFs with staffing waivers must maintain sufficient staffing levels for patient safety and must have a plan in place to resume mandatory staffing levels as soon as feasible. Temporary staffing waivers will only be approved for a two-week period.

## Federal Waivers

In addition to the blanket waivers provided in this AFL, the Centers for Medicare and Medicaid Services have approved federal waivers facilities impacted by the fires and windstorms in Los Angeles in Ventura counties. These waivers include the following:

1. CMS is waiving the requirement in Title 42 Code of Federal Regulations (CFR) 483.30 for physicians and non-physician practitioners to perform in-person visits for nursing home residents and allow visits to be conducted, as appropriate, via telehealth options. Any physicians or non-physician practitioners providing telehealth must have a license to practice in California.
2. The requirement that hospital patients must have a 3-day stay in a GACH to be eligible for Medicare coverage in SNFs is waived.
3. Allow for rooms in a long-term care facility not normally used as a resident's room to be used to accommodate beds and residents for resident care in emergencies and situations needed to help with surge capacity. Rooms that may be used for this purpose include activity rooms, meeting/conference rooms, dining rooms, or other rooms, as long as residents can be kept safe and comfortable and other applicable requirements for participation are met.
4. SNFs may complete Level 1 Pre-Admission Screening and Annual Resident Review (PASARR) assessments post-admission on or before the 30th day of admission. New residents admitted to SNFs with a mental illness (MI), or intellectual disability (ID) should be referred promptly by the SNF to State PASARR program for Level 2 Resident Review.

Individual facilities may also submit 1135 waiver requests directly to CMS if there are additional needs beyond what is included in the blanket waivers.

This statewide waiver is approved under the following conditions:

- SNFs shall continue to comply with unusual occurrence reporting requirements specified in Title 22 California Code of Regulations section 72541.
- SNFs shall continue to report all changes as required under Title 22 CCR section 72211, to [CABLTC@cdph.ca.gov](mailto:CABLTC@cdph.ca.gov), however the 10-day reporting shall not apply. SNFs shall report all changes as soon as feasible within 30 days of the change. When any temporary beds are no longer in use, SNFs shall report the lowering of patient capacity to CDPH.
- SNFs shall report any substantial staffing or supply shortages that jeopardize resident care or disrupt operations.
- SNFs shall continue to provide necessary care in accordance with residents' needs and make all reasonable efforts to act in the best interest of residents.
- SNFs shall follow their disaster response plan.
- SNFs shall comply with directives from their local public health department to the extent that there is no conflict with federal or state law or directives or CDPH AFLs.

CDPH understands the importance of ensuring the health and safety of all Californians and maintaining vital access to skilled nursing services. CDPH encourages facilities to implement contingency plans to address staff absenteeism and the rapid influx of residents. CDPH will continue to promote quality healthcare and provide technical assistance and support compliance with core health and safety requirements. CDPH is taking this unprecedented action due to the significant challenges California's health care system is facing as a result of the Los Angeles and Ventura counties fires and windstorms. As a result of this temporary waiver, SNFs do not need to submit individual program flexibility requests for the requirements specified above, except when seeking a staffing waiver.

## Program Flexibilities

If facilities need flexibility for requirements not addressed in the AFL, they should submit an individual request. Requests for program flexibility must include justification for the program flexibility request and adequate supporting documentation that the proposed alternative does not compromise patient care. Facilities can request a program flexibility on the Risk and Safety Solutions (RSS) website.

This waiver is valid until March 31, 2025, and may be extended based on any updated Executive Orders.

If you have any questions about this AFL, please contact your local district office.

Sincerely,

**Original signed by Chelsea Driscoll**

Chelsea Driscoll

Acting Deputy Director

Resources:

- Proclamation of State of Emergency (PDF)
- Executive Order N-2-25 (PDF)
- Blanket Federal Waivers for 2025 Southern CA Wildfires (PDF)

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