

Publications

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CMS Suspends Most Medicare Certification Activity During Government Shutdown

Key Takeaways

- CMS has paused most certification and survey activities during the government shutdown. Key functions like processing initial certification and change of ownership (CHOW) applications, conducting initial, standard and revisit surveys, and complaint investigations other than those alleging immediate jeopardy or patient harm are on hold until operations resume.
- Providers undertaking activities that require action by CMS state survey agencies should expect prolonged approval timelines.
- Delays in CMS certification activities that slow processing of initial enrollments and CHOW applications may delay billing activities.
- Providers should evaluate upcoming changes for shutdown-related disruptions. Transactions, expansions and operational updates may require revised timelines and contingency planning.

As the government shutdown enters its fourth week, the Centers for Medicare & Medicaid Services Quality, Safety & Oversight Group and Survey & Operations Group (CMS) clarified what the shutdown means for Medicare-certified providers and suppliers: nearly all certification and survey activities are on pause.

In a revised memo issued Oct. 21, 2025, CMS reaffirmed that any activity or function requiring action by the CMS state survey agencies is suspended until government operations resume.

CMS Halts Key Certification and Survey Activities

The memo outlines specific activities that are suspended during the shutdown, including:

- **Medicare certification surveys**, including initial, standard and “deemed status” surveys conducted by accreditation organizations
- **Most complaint investigation surveys**, except those alleging immediate jeopardy or actual harm
- **Most revisit surveys**, except revisits to ensure that immediate jeopardy or patient

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Related Capabilities

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harm has been addressed, to prevent mandatory termination within 45 days of the termination date, or to prevent mandatory denial of payment for new admissions within 15 days of imposition

- **Processing certification activities** where CMS state survey agency action is required, including changes of ownership (CHOWs) and changes in location
- **Informal dispute resolutions**, except when an immediate adverse action will be taken against the provider during the shutdown, like terminating a provider agreement
- **MDS or OASIS reporting**
- **Surveyor training and testing**
- **New CMP-funded improvement projects**

Additionally, providers who were in a survey cycle at the time of the shutdown will not be entitled to a revisit survey unless they meet one of the above identified exceptions. This is particularly concerning for providers who are subject to a discretionary denial of payments for new admissions, which can have significant negative financial consequences for providers.

Some Enrollments and Licenses Proceed Despite Shutdown

Not all enrollment or licensing activity has stopped. Medicare enrollment activities that don't require action by CMS state survey agencies — including those solely managed by Medicare Provider Enrollment Operations Group and the Medicare Administrative Contractors (MACs) — are still moving forward.

Similarly, state-level licensing functions remain unaffected. Activities independent from Medicare obligations — like initial state licensing and changes to state licenses — *are not* impacted by the shutdown. Certified providers and suppliers remain subject to these state surveys and obligations.

Certification-Linked Activities Face Shutdown Delays

The ongoing government shutdown is expected to significantly delay Medicare provider enrollment applications that require CMS certification activity by the CMS state survey agencies, which are limited to those involving Medicare certified providers — such as hospitals, home health agencies, SNFs and hospices — and certified suppliers — such as ASCs, portable x-ray suppliers and ESRD facilities.

Certification-related delays may affect actions such as:

- Initial enrollments
- Changes of ownership or location
- Address or name changes
- Adding or removing HHA branch locations
- Adding practice locations or sites
- Expansion/removal and change in modalities and services for ESRD
- Adding extension locations to rehabilitation agencies
- Adding hospice multiple locations
- Ceasing operations

CMS Delays May Affect Operational and Financial Timelines

Providers involved in transactions or adding or modifying business operations that trigger certification activities by CMS state survey agencies should expect significant delays in receiving CMS approval until the shutdown ends, as most surveys and enrollment applications won't be processed until then.

Once government functions resume, backlogs across CMS, the MACs, CMS state survey agencies and accrediting bodies will likely slow approvals even further, at least until they are able to catch up. Certified providers and suppliers should factor in these delays when planning for any current or future projects, as it has the potential to impact transactions and business operations by slowing the timing on billing activities and receipt of payment for services.

Providers can contact a member of Polsinelli's Licensure, Enrollment, & Certification team to confirm how the shutdown impacts their specific scenarios.