Revision: HCFA-PM-95-4 (HSQB) Attachment 4.35-E

JUNE 1995

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State/Territory:	Georgia		

ELIGIBILITY CONDITIONS AND REQUIREMENTS

Enforcement of Compliance for Mursing Facilities

Civil Money Penalty: Describe the criteria (as required at \$1919(h)(2)(A)) for applying the remedy.

, X Specified Remedy

(Will use the criteria and notice requirements specified in the regulation.)

__ Alternative Remedy

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

TN No. 95-034
Supersedes Approval Date: 3-8-96
Zifective Date: 7-/-95

IN No. New