

# Bed Hold and Return to Facility Policy & Procedure

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New York



## **BED HOLD AND RETURN TO FACILITY POLICY AND PROCEDURE**

### **POLICY**

It is the policy of this facility that residents who are transferred to the hospital or go on a therapeutic leave are provided with written information about the State's bed hold duration and payment amount before the transfer. Additionally, this facility permits residents to return to the facility after hospitalization or therapeutic leave if their needs can be met by the facility, they require the services provided by the facility and they are eligible for Medicaid or Medicare covered services or services covered by another payer.

Residents and their representative will be provided with bed hold and return information at admission and before a hospital transfer or therapeutic leave. The facility will maintain in contact with the resident and representative while the resident is absent from the facility and arrange for their return if appropriate.

Nursing and social work staff are educated about the resident's bed hold and return rights to ensure that required information is provided at the time the resident leave the facility.

### **CENTERS FOR MEDICAID AND MEDICARE SERVICES (CMS) - DEFINITIONS**

**Resident Representative:** For purposes of this subpart, the term resident representative means any of the following:

- a) An individual chosen by the resident to act on behalf of the resident in order to support the resident in decision-making; access medical, social or other personal information of the resident; manage financial matters; or receive notifications;
- b) A person authorized by State or Federal law (including but not limited to agents under power of attorney, representative payees, and other fiduciaries) to act on behalf of the resident in order to support the resident in decision-making; access medical, social or other personal information of the resident; manage financial matters; or receive notifications;
- c) Legal representative, as used in section 712 of the Older Americans Act; or.
- d) The court-appointed guardian or conservator of a resident.
- e) Nothing in this rule is intended to expand the scope of authority of any resident representative beyond that authority specifically authorized by the resident, State or Federal law, or a court of competent jurisdiction.

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## OBJECTIVE OF THE BED HOLD AND RETURN TO FACILITY POLICY

The objective of the bed hold and return to facility policy is to ensure that the resident is informed of the State's bed hold duration and payment and their right to return to the facility from a hospitalization or therapeutic leave, if appropriate.

## PROCEDURE

### A. Bed Hold and Return Notice before transfer.

The facility will provide written information per the *(insert name of the facility notice/form)* to the resident or resident representative before the resident is transferred to a hospital or the resident goes on therapeutic leave that specifies the following:

- a. The duration of the state bed hold policy *(Insert state specific language)* during which the resident is permitted to return and resume residence in the nursing facility
- b. The reserve bed payment policy in accordance to the state plan is:
  - i. *(insert state and facility specific language)*
- c. The facility's policies regarding bed hold periods permitting resident to return
  - i. *(Insert facility specific language)*
    - (i) The following is the bed hold period for:
    - (ii) Medicare as the primary payer source - \_\_\_\_\_ days
    - (iii) Medicaid as the primary payer source - \_\_\_\_\_ days
    - (iv) Private pay as the primary payer source - \_\_\_\_\_ days
    - (v) Other (if applicable)
- d. Notification to the resident and resident representative of:
  - i. The transfer or discharge
  - ii. Reasons for the move
  - iii. In writing in a language and manner they can understand
  - iv. Readmission standards
  - v. Admission standards (any State admission standards under State laws)
- e. The facility will provide the bed hold policy upon admission into the facility via the admission packet *(See Admissions Policy and Procedure)*

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**B. Bed Hold and Return notice upon transfer.**

The facility will provide the resident and resident representative a written notice which specifies the duration of the bed hold policy at the time of transfer for hospitalization or therapeutic leave. This Notice specifies the following information:

- a. The duration of the state bed hold policy (*Insert state specific language*) during which the resident is permitted to return and resume residence in the nursing facility
- b. The reserve bed payment policy in accordance to the state plan is:
  - i. (*insert state and facility specific language*)

**New York State Bed Hold Payment Policy**

New York's Medicaid program will reimburse a nursing home to reserve a bed for a Medicaid recipient aged 21+, for up to fourteen (14) days in a 12-month period for temporary hospitalizations and for up to ten (10) days in a 12-month period for non-hospital (therapeutic) leaves of absence.

The resident must be absent from the nursing home overnight for the day to be considered a reserved bed day. A resident is considered to be absent overnight when he or she is absent later than the time at which the facility normally conducts its patient census. The day the resident departs for temporary hospitalization or the leave of absence begins is counted as a reserved bed day, but the day he/she returns is not counted as a reserved bed day.

In order to be eligible for Medicaid payment, the individual must have resided in the nursing home for at least 30 days since the date of his/her initial admission. In addition, the nursing home (or discrete unit) to which the resident will return has a vacancy rate of no more than 5 percent on the first day the resident is hospitalized or on leave of absence. When computing vacancy rates, a nursing home must disregard beds that have been reserved for other residents.

- c. The facility's policies regarding bed hold periods permitting resident to return
  - i. (*Insert facility specific language*)
    - (i) The following is the bed hold period for:
    - (ii) Medicare as the primary payer source - \_\_\_\_\_ days
    - (iii) Medicaid as the primary payer source - \_\_\_\_\_ days



- (iv) Private pay as the primary payer source - \_\_\_\_ days
- (v) Other (if applicable)
- d. Notification to the resident and resident representative of:
  - i. The transfer or discharge
  - ii. Reasons for the move
  - iii. In writing in a language and manner they can understand
  - iv. Readmission or return to the facility policy
  - v. Admission standards (any State admission standards under State laws)
- e. In cases of emergency transfer, notice at the time of transfer means that the facility will send the notice along with the necessary paperwork to the receiving setting and the resident representative will receive a notice sent within \_\_\_\_ hours of transfer.
- f. Documentation of bed hold notice will be completed in the individual medical record.

**C. Readmission or Return to the Facility**

The facility will readmit or allow the opportunity for return to the facility when:

- a. Residents to return to the facility after hospitalization or therapeutic leave if their needs can be met by the facility
- b. The resident requires the services provided by the facility
- c. The resident is eligible for Medicare skilled nursing facility services or Medicaid nursing facility services
- d. Beyond Bed Hold Period
  - i. A resident, whose hospitalization or therapeutic leave exceeds the bed hold period under the State plan, returns to the facility to their previous room if available or immediately upon the first availability of a bed in a semiprivate room if the resident
    - (A) Requires the services provided by the facility; and
    - (B) Is eligible for Medicare skilled nursing facility services or Medicaid nursing facility services.
- e. If the facility determines that a resident who was transferred with an expectation of returning to the facility cannot return to the facility, the facility will comply with the requirements of discharge notice regulations. (See Discharge Notice Policy – insert facility policy reference)
- f. Respite Residents



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- i. **(Insert facility specific information here)**
- g. If the facility can no longer provide the needed services for the resident and are unable to accept the resident in return after transfer, (insert facility/State specific language). Refer to Transfer Discharge Policy and Procedure

### **Cross Referenced Policies**

Admission  
Transfer  
Discharge – Voluntary/Involuntary  
Resident Rights  
Resident Handbook  
Financial – Bed Hold Rates

### **References**

Medicare and Medicaid Programs; Reform of Requirements for Long-Term Care Facilities  
10/04/16:

- <https://www.federalregister.gov/documents/2016/10/04/2016-23503/medicare-and-medicaid-programs-reform-of-requirements-for-long-term-care-facilities>

CMS Memo Ref: S&C 17-07-NH: Advance Copy – Revisions to State Operations Manual (SOM),  
Appendix PP- Revised Regulations and Tags, 11/09/16:

- <https://www.cms.gov/Medicare/Provider-Enrollment-and-Certification/SurveyCertificationGenInfo/Downloads/Survey-and-Cert-Letter-17-07.pdf>

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## **PROCEDURE FOR BED HOLD NOTIFICATION**

### **PURPOSE**

The facility shall inform and provide in writing to the resident and/or the resident's representative the facility's bed hold and return to the facility policy at the time of transfer or leave of absence specifying the duration of the bed hold policy.

### **PROCEDURE**

1. The nurse will obtain the Bed Hold Policy and Return to Facility notice and provide the notice to the resident and their representative at the time of transfer or leave of absence.
2. The nurse will ensure that a copy of the notice accompanies the resident as the resident leaves the facility.
3. The nurse will inform the resident representative, on the telephone if necessary, about the bed hold and return to facility policy and ask how best to provide a copy of the notice to the representative.
  - a. The nurse will inform the representative that the notice accompanied the resident at the time the resident left the facility.
  - b. The nurse will document the provision of the Bed Hold Policy and Return to Facility notice to the resident and information given to the representative in the resident's record.
4. The social worker will contact the resident representative on the next working day to ensure that the representative understands the bed hold and return to facility information.
5. The social worker will make periodic contact with the resident and/or representative during the resident's absence.
6. When the social worker is informed that the resident is ready to return to the facility from the hospital, the interdisciplinary team will complete a clinical assessment to plan for the resident's care needs upon return.
7. When the social worker is informed that the resident is ready to return to the facility from leave of absence, the social worker will inquire about any changes in the resident's health status in order to plan for the resident's care needs upon return. A nurse will make a follow-up call to obtain additional clinical information, if needed.
8. A resident whose hospitalization or therapeutic leave exceeds the bed hold period under

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the State plan, will be able to return to the facility to their previous room if available or immediately upon the first available bed in a semi-private room if the resident:

- a. Requires the services provided by the facility
  - b. Is eligible for Medicare SNF services or Medicaid nursing facility services
9. The unit where the resident will return will be informed of the resident's impending return.
10. Should the interdisciplinary team find that the facility cannot meet the resident's needs, the facility's discharge notice policy and procedure will be followed.

## References

Medicare and Medicaid Programs; Reform of Requirements for Long-Term Care Facilities 10/04/16:

- <https://www.federalregister.gov/documents/2016/10/04/2016-23503/medicare-and-medicaid-programs-reform-of-requirements-for-long-term-care-facilities>

State Operations Manual Appendix PP – Guidance to Surveyors for Long-Term Care Facilities, 06/10/16:

- [https://www.cms.gov/Regulations-and-Guidance/Guidance/Manuals/downloads/som107ap\\_pp\\_guidelines\\_ltcf.pdf](https://www.cms.gov/Regulations-and-Guidance/Guidance/Manuals/downloads/som107ap_pp_guidelines_ltcf.pdf)

CMS Memo Ref: S&C 17-07-NH: Advance Copy – Revisions to State Operations Manual (SOM), Appendix PP- Revised Regulations and Tags, 11/09/16:

- <https://www.cms.gov/Medicare/Provider-Enrollment-and-Certification/SurveyCertificationGenInfo/Downloads/Survey-and-Cert-Letter-17-07.pdf>