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| **Bed Hold Policy and Procedure** | **Subject: Bed Hold**  |
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| **Effective:**  | **Revised:**  |

**POLICY**: To ensure compliance with Federal and State Bed Reservation Regulations

**PROCEDURE**:

The facility in accordance with New York State Regulations will reserve a bed for a resident who· is either transferred to the hospital or on a therapeutic leave, provided the conditions below are met:

It is expected that the resident will require readmission to the Facility and the Facility will be able to provide the care for the resident at the time of readmission; If the resident desires readmission and reservation of the bed or third party payers require readmission (within prescribed State Regulations);

***Privately Paying and Medicare Part a Residents***:

Upon agreement to pay the private daily rate, private paying residents including those covered by Medicare Part A or another private health plan (or their sponsors and agents) may hold a resident’s bed available is the Resident is expected to return to the Facility AND providing the Resident’s accounts are not in arrears. During the Resident’s absence, the daily rate under the admissions agreement is owed unless the Facility is notified to cancel the bed-hold.

***Bed Reservations For Medicaid Residents***

Medicaid will only allow Bed hold when the Facility’s vacancy rate is no more than 5% on the day of the resident’s departure, and the Resident has resided in the Facility for at least thirty (30) days.

\*\*If a Medicaid-sponsored Resident takes leave of absence overnight for any reason other than hospitalization, Medicaid will pay to hold the bed for up to ten (10) days in any twelve (12) month period. This is called “Therapeutic Bedhold”. The facility will receive 95% of the daily rate.

***Hospice Residents Only***

If a Medicaid sponsored Resident in the facility under takes leave of absence overnight for hospitalization, per NYS Regulations, we will hold the bed for up to fourteen (14) days in any twelve (12) month period. This is called “Hospital Bedhold”. The facility will receive 50% of the daily rate.

MLTCs and Managed Medicaid’s may require authorization prior to the resident taking a leave of absence. Failure to wait for approval may cause the plan to deny all future payment, and the resident or responsible party will become liable.

The NAMI/Income amount continues to be due during the bed-hold.

***Readmission From Non-Bedhold or after Bedhold is Terminated***

If Medicaid-covered Resident is ineligible for a reserved bed, or takes a leave of absence overnight due to hospitalization, or if the bed reservation expires, the Resident and/or the Responsible party have the option to pay to reserve the bed at the prevailing private pay rate. If the bed is not reserved privately, the facility will immediately release the bed.

All Medicare or Medicare nursing home eligible residents on leave due to hospitalization (or therapeutic leave), requiring skilled nursing services, will be given priority readmission for the next available semi-private or a bed in a multi-bedded room. If the facility determines that a resident who was transferred with an expectation of returning to the facility, cannot return, the appropriate discharge procedures will be followed (See: NYS Code 415.3 and CMS code 483.15(d))

Bed Reservation through the Veterans Administration

During hospitalization or leave of absence, the Facility will reserve the bed for the number of days during which the Veterans Administration (“VA”) agrees to pay the VA contract charges. If the VA-covered bedhold expires, the bed may be reserved for the prevailing private daily rate so long as the Resident’s payments for care are not in arrears.

A copy of this Bedhold Notice will be sent with the resident at the time of hospitalization or leave of absence. It will also be sent to the responsible party within 1 business day.

**Bed Hold Notification**

 The current policy of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (hereinafter “the Facility”) as of \_\_\_\_\_\_\_\_\_\_\_ regarding bed reservations is as follows:

Updated bed-hold regulations have been adopted as of May 29, 2019, in accordance with the 2017/2018 Executive Budget.  Chapter 57 of the Laws of 2017 amended Public Health Law (PHL) § 2808(25) places limits on the availability of Medicaid payments to nursing facilities to reserve a bed for a Medicaid recipient 21 years of age or older who is temporarily absent from the facility.  These changes conform to NYS code 415.3 and CMS code 483.15(d).

Where the Facility has a vacancy rate of no more than 5% and a Medicaid-covered Resident has resided in the Facility for at least (30) days, the Facility will reserve a bed, as described below.

 If the Medicaid-sponsored Resident takes a therapeutic leave of absence (not for hospitalization) in accordance with that Resident’s care plan, Medicaid will pay to hold the bed for up to ten (10) days in any twelve (12) month period.

 If a Medicaid-sponsored **Hospice Resident** takes leave of absence overnight for hospitalization, per NYS regulations, the facility is required to hold the bed for up to fourteen (14) days in any twelve (12) month period. This benefit is not available to non-Hospice Residents.

 A resident and/or their designated representatives may choose to pay privately to hold a Resident’s bed at the prevailing daily basic rate for as long as they wish, if it is expected that the Resident will return to the Facility from the hospital or from a leave of absence and if the Resident’s payment obligations are not in arrears. During the resident’s absence, the prevailing daily basic rate is owed unless the Facility is notified to cancel bedhold.

All Medicare or Medicaid nursing home eligible residents on leave due to hospitalization, and requiring skilled nursing facility services, will be given priority readmission for the next available bed in a semi-private or multi-bedded room. If the facility determines that a resident who has transferred with an expectation of returning to the facility, cannot return, the appropriate discharge procedures will be followed.

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Administrator