

**Rule No. 560-X-46-.08. Admission and Periodic Review**

(1) The Medicaid ~~Long Term Care Admissions/Records Unit~~ Medical and Quality Review Unit or designee will perform preadmission review of all Medicaid admissions to assure ~~ensure~~ the necessity and appropriateness of the admission and that a physician has certified on the date of admission, -the need for swing bed care. Medicaid or its designee will certify the level of care required by the patient at the time of admission by utilizing Form 199 ~~the XIX-LTC-4 forms.~~

(2) For applications which are not approved by the ~~Long Term Care Medical and Quality Review Unit~~ or its designee, ~~Admissions/Records Unit~~ the Medicaid staff physician ~~a Medical Director,~~ will review and either approve or deny the medical eligibility.

(3) Recipients must meet Skilled Nursing Facility (SNF) -medical and financial requirements for swing bed admissions just as they are required for SNF admissions. Refer to Chapter 10 and Chapter 25.

(4) For recipients who receive retroactive Medicaid eligibility while utilizing swing bed services, the hospital should furnish a ~~form MED-54~~ attaching all doctors' orders, progress and nurses' notes for the time in question to ~~Long Term Care Admissions/Records Unit~~ Medicaid's fiscal agent.

(5) Medical approvals may be issued by the Medicaid ~~Long Term Care Medical and Quality Review Unit~~ or designee ~~Admissions/Records Unit~~ if the information provided to Medicaid documents the need for SNF care and the recipient meets criteria set forth in Rule 560-X-10-.13 ~~10~~ for SNF care.

(a) The admission application packet must be sent to the Medicaid ~~Long Term Care Medical and Quality Review unit~~ or designee ~~Admissions/Records Unit~~ within ~~30~~60 days from the date Medicaid coverage is sought and consist of:

1. ~~A~~ a fully completed Medicaid Status Notification Form ~~199 XIX LTC 4~~ including all documentation certified by the applicant's attending physician to support the need for nursing home level of care. Refer to Rule 560-X-10-.140 and .13, -for in-depth information.

(b) Once the ~~LTC-4 Form 199~~ has been reviewed and approved medically, the facility is notified by a letter advising the ~~LTC-2 form~~ that the patient is medically and financially eligible for swing bed services. The ~~XIX LTC-2A~~ is sent to the facility advising that medical eligibility is established, but financial eligibility has not been determined. If the ~~LTC-2A~~ is received, the facility should advise the patient or sponsor of the need to establish financial eligibility by making an application at the District Office.

(6) Continued stay reviews are required to assure the necessity and appropriateness of skilled care and effectiveness of discharge planning. Recertification of SNF patients is required 30, 60, and 90 days after admission and then every 60 days thereafter. Physicians must state "I certify" and specify that the patient requires skilled care for continued stay in the facility. Facilities must have written policies and procedures for recertification. ~~The Inspection of Care team will monitor these during medical reviews to assure compliance~~

(7) Reimbursement requires a 3-day qualifying stay in any acute care hospital prior to admission to a swing bed in any hospital. The swing- bed stay must fall within the same period of illness as the qualifying stay.

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**Statutory Authority:** Title XIX, Social Security Act; State Plan, Attachment 3.1-A, 4.19-D; 42 CFR Section 435.1009, 456.1, 435.911, 409, Subpart D; 482.66.

**History:** Emergency Rule effective March 30, 1989. Permanent rule effective July 13, 1989.

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