

**MULTIDISCIPLINARY POLICY:
ADMITTING, FINANCE, NURSING & SOCIAL WORK**

POLICY NUMBER: SW - B102 PEP

**SUBJECT: BED-HOLD POLICY DURING PANDEMIC/INFECTIOUS DISEASE
EMERGENCY**

POLICY:

As part of Gurwin's Pandemic/Infectious Disease Emergency Plan, it is the facility's policy to adhere to the New York State Department of Health Behold Policy (effective May 29, 2019) as noted below:

- Residents under 21 will be reimbursed at 100% of the Medicaid rate for hospital, therapeutic and hospice leaves of absences. There are no day limits for residents under 21 years of age.
- Residents 21 and over on hospice will be reimbursed at 50% of the Medicaid rate otherwise payable to the facility for services provided. Payments cannot exceed 14 days in any 12-month period.
- Residents 21 and over on therapeutic leaves of absence will be reimbursed at 95% of the Medicaid rate otherwise payable to the facility for services provided, and payments cannot exceed 10 days in any 12-month period.

All other residents will be offered the opportunity to pay privately to hold the bed. Residents paying privately may hold a bed if arrangements for continued payment have been made with the Finance Department.

At time of admission and again at the time of transfer, for any reason, Gurwin shall verbally inform and provide written information to the resident/resident representative that specifies their right to privately hold the bed or be re-admitted to the first available and appropriate semi-private room, should they want to rerun to the facility.

PURPOSE:

Notice before transfer. Before a nursing facility transfers a resident to a hospital or the resident goes on therapeutic leave, the nursing facility must provide written information to the resident or resident representative that specifies: (i) the duration of the state bed-hold policy, if any, during which the resident is permitted to return and resume residence in the nursing facility; (ii) the reserve bed payment policy in the state plan, if any; (iii) the nursing facility's policies regarding bed-hold periods, which must be consistent with permitting a resident to return; and the bed-hold notice upon transfer. At the time of transfer of a resident for hospitalization or therapeutic leave,

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a nursing facility must provide to the resident/resident representative written notice which specifies the bed hold policy.

A facility must establish and follow a written policy on permitting residents to return to the facility after they are hospitalized or placed on therapeutic leave. The policy must provide for the following: (i) A resident, whose hospitalization (residents under 21 or on hospice) 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 semi-private 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.

PROCEDURE:

1. Upon admission, information regarding New York State Department of Health Bed Hold Policy as implemented by Gurwin is provided by:
 - a. The Admissions Department: will provide the resident/resident representative with a copy of “Making the Transition” via email, which provides information regarding Gurwin’s bed hold policy in writing.
 - b. While obtaining the resident’s admitting psychosocial, the social worker will verbally explain Gurwin’s bed hold policy to the resident/resident representative.
 - i. The social worker will document the confirmation of the education of bed-hold policy in the resident’s psychosocial.
2. The resident representative/power of attorney for all residents who do not meet the Medicaid eligibility criteria (see page 1 for definition of eligibility) and who are transferred and admitted to a hospital will:
 - a. Receive a phone call from a representative from the Finance Department explaining the bed hold policy by the next business day;
 - b. If the resident does not secure a bed hold, the resident representative/power of attorney will be informed of the resident’s right to be readmitted to the facility immediately upon the first available, appropriate bed in a semi-private room if the resident:
 - i. requires the services provided by the facility; and
 - ii. is eligible for nursing home services.



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- c. The Finance Representative will send out an email notifying the Admissions Office and the Social Work Department of the bed hold status as per resident representative/power of attorney's wishes.
 - i. The assigned Social Worker will document verbal notification of bed hold policy and outcome of resident/power of attorneys wishes in the resident's medical record.
 - d. If the bed is secured via private resources, the family will be informed that the resident will:
 - i. Return to the resident's previous bed if resident is medically compatible with roommate.
 - ii. Will be re-admitted to a room that is medically compatible as medical needs dictate.
3. The Admission Department will mail a letter to the resident/resident representative/power of attorney explaining the resident's bed hold eligibility/30-day transfer discharge rights and Gurwin's bed-hold policy on the first work day post admission to the hospital. (*see attached*).
 4. Upon transfer/discharge, Nursing will issue the resident/resident representative a copy of Gurwin's bed hold policy along with a 30-day Transfer/Discharge notice informing them of their rights to appeal.
 5. The Chief Social Work Officer (or proxy) will fax a copy of Gurwin's 30 Day Transfer and Discharge Notice to the Office of the State Long-Term Care Ombudsman's Office notifying them of a resident's transfer or discharge from the facility on a monthly basis.

The Gurwin Jewish Nursing & Rehabilitation Center has established and maintains identical policies and practices regarding the transfer, discharge and provision of all required services for all individuals, regardless of source of payment.

See Attachment: NYDOH – DAL July 3, 2019