PAYMENTS FOR MEDICAL AND REMEDIAL CARE AND SERVICES

METHODS FOR PAYMENT FOR RESERVING BEDS DURING A RECIPIENT'S ABSENCE FROM AN INPATIENT FACILITY

CITATION
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PAYMENT FOR RESERVATION OF BEDS

A temporary absence of a recipient from a facility (nursing facility or ICF/DD) shall not interrupt the monthly payment to the facility provided the facility keeps a bed available for the recipient subject to the limitations outlined in I and II below.

The period of absence is determined by counting as the first day of absence the day the recipient left the facility. Only a period of twenty-four (24) hours or more shall be considered an absence. Absences for twenty-three (23) hours or less on a consistent basis could jeopardize continued medical certification for the resident.

The Bureau of Health Services Financing, Health Standards Section, shall determine whether hospitalization is for an acute condition or if a recipient's plan of care provides for leaves of absence.

I. Leave Days for Residents of ICF/DD Facilities

A. For residents of ICF/DD facilities, the bed is reserved for up to seven (7) days per hospitalization for treatment of an acute condition. Hospital leave days are reimbursed at seventy five percent (75%) of the applicable ICF/DD per diem rate.

B. The bed of a resident of an ICF/DD facility is reserved for up to forty-five (45) leave of absence days per recipient per State fiscal year with a thirty (30) day limit per temporary absence per recipient when permitted by the recipient's plan of care. A paid leave of absence is defined as any temporary stay outside of the facility provided for in the recipient's plan of care. The count of utilized leave days begins on July 1st of each year and runs through June 30th of the following year.

Leave days covered under the 45 day limit include visits with relative(s) or friend(s) and camp days. Leave days for the following purposes shall be excluded from the annual 45 day limitation, but are still limited to thirty (30) days per occurrence per recipient and shall be included in the written plan of care:

(1) Special Olympics
(2) Roadrunner sponsored events
(3) Louisiana planned conferences
(4) Trial discharge leaves - fourteen (14) days per occurrence.
(5) Official state holidays

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C. Effective for dates of service on or after February 20, 2009, the reimbursement to non-state ICF/DDs for leave of absence days is 75 percent of the applicable per diem rate on file as of February 19, 2009.

II. Leave Days for Residents of Nursing Facilities

A. For each Medicaid recipient, nursing facilities shall be reimbursed for up to seven hospital leave of absence days per occurrence per year, and 15 home leave of absence days per year when permitted by the recipient's plan of care. These days are recomputed annually beginning on January 1 of each year.

B. The reimbursement for hospital leave of absence days is 75 percent of the applicable per diem rate.

C. Nursing facilities with occupancy rates under 90 percent. Effective for dates of service on or after February 20, 2009, reimbursement for hospital and home leave of absence days will be reduced to 10 percent of the applicable per diem rate in addition to the nursing facility provider fee.

D. Nursing facilities with occupancy rates equal to 90 percent or greater.

1. Effective for dates of service on or after February 20, 2009, the reimbursement paid for home leave of absence days will be reduced to 90 percent of the applicable per diem rate, which includes the nursing facility provider fee.

2. Effective for dates of service on or after March 1, 2009, the reimbursement for hospital leave of absence days shall be 90 percent of the applicable per diem rate, which includes the nursing facility provider fee.

3. Effective for dates of service on or after July 1, 2013, the reimbursement paid for leave of absence days shall be 10 percent of the applicable per diem rate in addition to the provider fee amount. The provider fee amount shall be excluded from the calculations when determining the leave of absence days payment amount.

E. Occupancy percentages will be determined from the average annual occupancy rate as reflected in the Louisiana Inventory of Nursing Home Bed Utilization Report published from the period six months prior to the beginning of the current rate quarter. Occupancy percentages will be updated quarterly when new rates are loaded and shall be in effect for the entire quarter.

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F. The bed of a nursing facility resident may be reserved when an evacuation is required by the appropriate parish or state official.

1. A temporary leave of absence due to evacuation must meet all of the following criteria:

   a. The temporary leave of absence cannot exceed 30 days for each evacuation occurrence required by the appropriate parish or state official. Temporary absences beyond 30 days require prior approval by the Secretary of the Department.

   b. The temporary leave of absence for evacuations must be included in the resident's plan of care.

   c. The nursing facility must have a bed hold policy.

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The temporary leave of absence will continue until the resident is either discharged; admitted to another licensed Medicaid provider; or does not return to the nursing facility within 30 days, or a longer period if prior approval is obtained from the Secretary of the Department.

2. Payment for a temporary leave of absence due to evacuations includes two components.

   a. *Case-Mix Per Diem Rate*
   The evacuating nursing facility will receive their case-mix nursing facility per diem rate for the length of the temporary leave of absence, within the above limitations.

   b. *Additional Cost Evacuated Nursing Facilities Incur Facilitating the Temporary Leave of Absence*
   Additional expenses directly related to facilitating a temporary leave of absence necessitated by an evacuation are eligible for payment in addition to the case-mix nursing facility per diem rate.

      i. Eligibility

         (1) Nursing facilities must first apply for evacuation or sheltering reimbursement from all other sources and request that the Department apply for the Federal Emergency Management Agency assistance on their behalf.

         (2) Nursing facilities must submit expense and reimbursement documentation related to the evacuation or temporary sheltering of Medicaid nursing facility residents to the Department.

      ii Eligible Expenses.

      All additional expenses must be reasonable, necessary, and proper. All eligible expenses must be in addition to normal daily operating expenses already included in the nursing facility's case-mix per diem rate. Eligible expenses are subject to audit at the Department's discretion. Eligible additional expenses may include the following.

         (1) Temporary lodging of direct care personnel.

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(2) Additional direct care expenses, when a direct care expense increase of 10% or more is documented. Direct care expenses are defined under the Louisiana case-mix rule and the increase must be based on a comparison to the average of the previous two pay periods or other period comparisons determined acceptable by the Department.

(3) Care-related expenses as defined in the Louisiana nursing facility case-mix rate system and incurred in excess of care-related expenses prior to the evacuation.

(4) Additional medically necessary equipment, such as beds and portable ventilators not available from the evacuating nursing facility and rented or purchased specifically for the temporary leave of absence.

(a) These expenses will be capped at a daily rental fee not to exceed the total purchase price of the item.

(b) The allowable daily rental fee will be determined by the Department.

(5) Any other additional allowable costs as defined in the CMS Publication 15-1 that are directly related to the temporary leave of absence and that would normally be allowed under the Louisiana nursing facility case-mix rate.

iii. Payment of Additional Temporary Leave of Absence Expense

The payment calculation will follow section 7.c of attachment 4.19-D.

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