

## Division of Medicaid (DOM) Swing-Bed Criteria

### General Guidelines

This criteria is used for precertification of admission and concurrent review of continued stay in swing-bed units. For certification to the Medicaid swing-bed level of care, the beneficiary must, at a minimum, require assistance with the activities of daily living (ADLs). The following situations require Medicaid swing-bed certification:

- The beneficiary has only Medicaid coverage.
- A beneficiary having both Medicare and Medicaid coverage is admitted to a swing-bed for intermediate care (Medicare only covers skilled care).
- Beneficiaries having Part A Medicare are the responsibility of the Medicare program when in a swing-bed for skilled care. Medicaid will pay the Medicare co-insurance after the twentieth (20<sup>th</sup>) day in a swing-bed for Medicare/Medicaid beneficiaries through day one hundred (100) or the last day covered by Medicare, whichever comes first. When Medicaid becomes the primary payor, the stay must be certified.

### Definitions

**Swing-bed** - services provided in a swing-bed facility (requires a Mississippi Medicaid swing-bed provider number) that cannot be safely and cost-effectively provided in the home, and do not require the daily supervision of a physician, but do require nursing and/or rehabilitation services that must be provided daily to prevent or minimize deterioration, or to sustain health status.

**Daily** - means essentially seven (7) days per week. However, if rehabilitation services are not available on a seven (7) days per week basis, the requirement would be met if the beneficiary needs and receives services at least five (5) days per week.

Swing-bed benefits allow for up to a fifteen (15) day initial length of stay with additional days covered, if approved by HealthSystems of Mississippi.

### Transfers from Nursing Facilities

Beneficiaries admitted to the hospital from a nursing facility cannot be transferred to a swing-bed without authorization of the beneficiary's family and notification to the beneficiary's nursing facility. Beneficiaries transferred to a swing-bed will result in the beneficiary losing their Medicaid bed-hold payment at the nursing facility.

### **Review Criteria**

To qualify for swing-bed benefits:

1. The beneficiary must require, at a minimum, assistance with at least three (3) of the activities of daily living (ADLs) listed below, which cannot be safely and cost-effectively provided in the home and which must be performed by, or under the supervision of, qualified professional or technical personnel (i.e., registered nurses, licensed practical nurses, physical therapists, occupational therapists, etc.), **and**

2. The services are provided on a continuous not intermittent basis.

Activities of Daily Living:

- |              |                     |
|--------------|---------------------|
| a. Eating    | d. Personal Hygiene |
| b. Toileting | e. Ambulation       |
| c. Bathing   | f. Dressing         |

This contains the minimal standards of care expected to be provided for swing-bed beneficiaries.

**Additional Review Criteria**

1. The physician must visit and evaluate the beneficiary at least every thirty (30) days while he/she is in a swing-bed setting.
2. Services to be furnished must be pursuant to a physician's orders and be reasonable and necessary for the treatment of the beneficiary's illness or injury (i.e., be consistent with the nature and severity of the individual's illness or injury, medical needs, and accepted standards of medical practice). The services must also be reasonable in terms of duration and quantity.
3. There must be specific evidence that daily (i.e., continuous) nursing or rehabilitation services are required if:
  - the primary service needed is oral medication
  - the beneficiary is capable of independent ambulation, dressing, feeding, toileting, and hygiene
  - insulin injections are the only service a beneficiary is receiving, **and** prior to hospitalization, the beneficiary was on self-injections at home
  - the beneficiary and/or primary care giver is capable of being taught to safely perform the necessary treatment at home.
4. Swing-bed services will not be authorized when the beneficiary requires acute care.
5. Swing-bed services will not be authorized when services can be safely and more cost-effectively provided in the home.
6. Swing-bed services will not be authorized if the beneficiary needs intermittent rather than daily care.
7. When reviewing a transfer from an acute care setting to a swing-bed, or from swing-bed to home care, the level of care that most appropriately, safely, and cost-effectively meets the beneficiary's needs must be considered.

If the beneficiary meets the above criteria, the admission is approved and an initial length of stay of fifteen (15) days will be assigned. For continued stay in the swing-bed, an additional thirty (30) days may be approved if criteria is met, and based on the needs of the beneficiary.

If the beneficiary's condition deteriorates to the point where InterQual's acute care criteria is met, the case must be referred for physician review. The physician may deny further swing-bed care and recommend a change to acute care status.

**Intermediate Care Services**

Intermediate care services, other than in an institution for mental diseases, means health-related services provided to beneficiaries who do not require hospital or skilled nursing care, but whose mental or physical condition requires services that:

- are above the level of room and board,
- provide assistance with the activities of daily living, and
- can be made available only through institutional facilities.

The following are some examples of services which are appropriate for a swing-bed. Many of these services may also be appropriate for home care, therefore, the case must also meet the above criteria:

- Quality of Life - care must be provided in such a manner and in such an environment as will promote maintenance or enhancement of the quality of life of the beneficiary.
- Management and Evaluation of a Beneficiary Care Plan - services and activities must attain or maintain the highest attainable physical, mental, and psychosocial well-being of the beneficiary in accordance with a written plan of care which:
  - ⇒ describes the medical, nursing, and psychosocial needs and how those needs will be met,
  - ⇒ is initially prepared with the participation, to the extent possible, of the beneficiary and/or beneficiary's family or legal representative, by a team which includes the beneficiary's attending physician and a registered nurse with responsibility for the beneficiary's care, and
  - ⇒ is periodically reviewed and revised by such team.

The following are some examples of intermediate services but are not all inclusive:

- Administration of routine oral medications, eyedrops and ointments.
- General maintenance care of colostomy or ileostomy.
- Routine services to maintain satisfactory functioning of indwelling bladder catheters, including emptying containers and cleaning them and clamping tubing.
- Changes in dressings for non-infected post-operative or chronic conditions.
- Prophylactic and palliative skin care, including bathing and applications of creams, or treatment of minor skin problems.
- Routine care of the incontinent beneficiary, including the use of diapers and protective sheets.
- General maintenance care in connection with a plaster cast. (Supervision or observation may be required where the beneficiary has a pre-existing skin or circulatory condition or needs to have traction adjusted).
- Routine care in connection with braces and similar devices.
- Use of heat as a palliative and comfort measure, such as whirlpool or steam pack.
- Routine administration of medical gases (bronchodilator) after a regimen of therapy has been established.
- Assistance in dressing, eating, and going to the toilet.
- Periodic turning and positioning in bed.
- General supervision of exercises which have been taught to the beneficiary and the performance of repetitious exercises that do not require skilled rehabilitation personnel for their performance.