

**Bulletin:** MSA 05-11

**Distribution:** Nursing Facilities  
 Hospice

**Issued:** February 15, 2005

**Subject:** Clarification on Hospital Leave Days  
 (Bulletin MSA 04-20)

**Effective:** Upon Receipt

**Programs Affected:** Medicaid

Bulletin MSA 04-20 transmitted Medicaid Hospital Leave Day policy where Medicaid will only pay to hold a beneficiary's bed when the facility's total available bed occupancy is at 98 percent or more on the day the beneficiary leaves the facility.

Due to confusion expressed related to this policy, the following clarifications are being provided.

**Worksheet**

The following worksheet examples may be helpful for facilities in determining their occupancy.

**Examples of Worksheet for Determining % of Occupancy**

	Example 1	Example 2
Total Licensed Beds (excluding beds in an approved non-available bed plan)	179	140
Beds for Residents on Hospital Leave (Medicaid or private pay is paying to hold the bed)	6	8
Beds for Residents on Overnight Therapeutic Leave	0	10
Total Residents on Leave	6	18
Adjusted Licensed Beds	173	122
Number of Residents Physically in Facility (total occupancy minus total residents on leave)	$177 - 6 = 171$	$133 - 18 = 115$
Occupancy (number of residents physically in facility divided by adjusted bed capacity)	$171 / 173 = 99\%$	$115 / 122 = 94\%$

### **When Occupancy is Determined**

Program policy states that the facility's available bed occupancy is calculated "on the day" the beneficiary leaves the facility. "On the day" is defined as the facility's census at midnight. This being the case, the facility would be using their census at midnight on the day that the beneficiary leaves. Note that calculation of available bed occupancy for purposes of Medicaid reimbursement for hospital leave days is different than calculation of occupancy for cost reporting purposes.

### **Rise in Occupancy to 98 Percent During a Beneficiary Hospital Leave**

In cases where a facility's available bed occupancy is below 98 percent on the day the beneficiary leaves for an emergency admission to the hospital, but rises to 98 percent or more during his hospital stay, no hospital leave days can be billed for the beneficiary. Hospital leave days are only billable for a beneficiary if the occupancy rate is 98 percent or more on the day the beneficiary leaves for the hospital.

In cases where the available bed occupancy is at 98 percent on the day the beneficiary leaves and drops below 98 percent during his hospital stay, the facility may bill up to 10 hospital leave days.

### **Facilities Enrolled With More Than One Provider ID Number**

In instances where a facility is enrolled with Medicaid and has more than one Provider ID Number, the available bed occupancy must be calculated separately for each Provider ID Number.

### **Manual Maintenance**

The provider should retain this bulletin until the Nursing Facility specific chapters are incorporated into the Michigan Medicaid Provider Manual.

### **Questions**

Any questions regarding this bulletin should be directed to Provider Inquiry, Michigan Department of Community Health, P.O. Box 30731, Lansing, Michigan 48909-8231, or e-mail at [ProviderSupport@michigan.gov](mailto:ProviderSupport@michigan.gov). When you submit an e-mail, be sure to include your name, affiliation, and phone number so you may be contacted if necessary. Providers may phone toll-free 1-800-292-2550.

### **Approved**



Paul Reinhart, Director  
Medical Services Administration