

Michigan Department of Community Health

Bulletin Number: MSA 06-51

Distribution: Nursing Facilities (Provider Type 60)
County Medical Care Facilities (Provider Type 61)
Hospital Long Term Care Units (Provider Type 62)
Ventilator Dependent Units (Provider Type 63)

Issued: August 1, 2006

Subject:

- Non-Authorization of Care in a Ventilator Dependent Care Unit (VDCU) if a Facility has a Survey Citation of Actual Harm
- New Policy on Medicaid Enrollment as a VDCU and Additional VDCU Beds

Effective: September 1, 2006

Programs Affected: Medicaid

The purpose of this bulletin is to announce the following new policies regarding VDCU.

Non-Authorization of New Admissions to a Medicaid Approved VDCU if Facility has a Survey Citation of Actual Harm

Effective September 1, 2006, new admissions to a VDCU will not be approved from the date a nursing facility receives the CMS-2567 (written survey report) containing the survey citation at a level of actual harm or higher on the scope and severity grid (G, H, I, J, K or L) pertaining to a resident or residents of the VDCU. Authorizations of new admissions will resume when the State Survey Agency notifies the Medicaid Agency that all deficiencies have been corrected and the facility has been found to be in substantial compliance.

The above policy does not apply to the renewal of authorizations for Medicaid beneficiaries residing in a VDCU prior to the survey citation of actual harm.

New Policy on Medicaid Enrollment as a VDCU and Additional VDCU Beds

Currently, nursing facilities requesting approval to designate a number of beds as a VDCU or requesting to increase the number of its VDCU beds may do so by submitting a written request to Medicaid.

Effective September 1, 2006, Medicaid approval or denial of the above requests will be based on Medicaid policies in the Michigan Medicaid Provider Manual, Nursing Facility Chapter - Certification, Survey & Enforcement Appendix, Section 2.1, Dual Certification and Section 2.3, Criteria for Evaluation of Medicaid Bed Certification Requests. In addition, these VDCU requests will be coordinated with the facility's Licensing Officer in the MDCH Division of Nursing Home Monitoring and with the Health Facilities Engineering Section.

Manual Maintenance

Retain this bulletin until the information is incorporated in the Medicaid Provider Manual.

Questions

If you have questions about the manual, or problems locating information, you may contact Provider Inquiry at 1-800-292-2550 or providersupport@michigan.gov. If you submit an e-mail, be sure to include your name, affiliation, and a phone number so you may be contacted if necessary.

Approved

A handwritten signature in black ink, appearing to read "Susan Moran". The signature is fluid and cursive, with a long horizontal stroke at the end.

Susan Moran, Acting Deputy Director
Medical Services Administration