

Bulletin Number: MSA 09-55

Distribution: Nursing Facilities, County Medical Care Facilities, Ventilator Dependent Units, Hospital Long Term Care Units

Issued: October 16, 2009

Subject: Medicaid Cost Reporting for Medicaid Leave Days - Hospital

Effective: December 1, 2009

Programs Affected: Medicaid

The purpose of this bulletin is to revise and clarify Medicaid hospital leave day policy for reporting nursing facility census days on the Medicaid cost report. The definitions for Leave Day - Hospital and Census Day will no longer exclude from census reporting any day that may be reimbursed by any other payer source to hold a resident's bed. Providers must include in the daily nursing facility census count and in the cost report all days for which the nursing facility may be reimbursed, with the exception of Medicaid hospital leave days. Cost reports covering cost report periods ending December 31, 2009 and beyond must report Leave Days - Hospital as outlined in this bulletin.

Medicaid will continue to reimburse providers to hold a bed for a beneficiary away from the nursing facility for emergency hospital care when the beneficiary is expected to return to the nursing facility within ten (10) days and the nursing facility has 98% occupancy (as outlined in the Hospital Leave Days section of the Nursing Facility Coverages chapter of the Medicaid Provider Manual). These days continue to be excluded from the daily census and for cost reporting purposes. Additionally, providers should exclude from the daily census count and cost reporting those days for which a Medicaid beneficiary is in the hospital but the nursing facility is not at 98% occupancy and is ineligible to receive Medicaid hospital leave day reimbursement to hold the bed.

This policy changes the definitions of Leave Day – Hospital and Census Day in the Nursing Facility Chapter, Cost Reporting & Reimbursement Appendix of the Medicaid Provider Manual. Providers should review the definition changes in Section 3. The Nursing Facility Coverages Chapter of the Medicaid Provider Manual will be amended to further clarify policy contained in this bulletin.

Public Comment

The public comment portion of the policy promulgation process is being conducted concurrently with the implementation of the change noted in this bulletin. Any interested party wishing to comment on the change may do so by submitting comments in writing to:

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Or
E-mail: morrowd@michigan.gov

If responding by e-mail, please include "Hospital Leave Days" in the subject line.

Manual Maintenance

Retain this bulletin until the information has been incorporated into the Michigan Medicaid Provider Manual.

Questions

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

APPROVED

A handwritten signature in black ink that reads "Stephen Fitton". The signature is written in a cursive, flowing style.

Stephen Fitton, Acting Director
Medical Services Administration