

Bulletin Number: MSA 20-16

Distribution: Nursing Facilities, Medicaid Health Plans, Integrated Care Organizations, Program of All Inclusive Care for the Elderly (PACE) Providers, Hospice Providers

Issued: March 25, 2020

Subject: COVID-19 Response: Options for the Use of Nursing Facility Beds

Effective: Immediately

Programs Affected: Medicaid, MI Health Link, PACE, Hospice

Per Centers for Disease Control and Prevention (CDC) and State recommendations, social distancing is encouraged to slow the spread of COVID-19 and thus preserve the health system capacity for the duration of this pandemic. Minimizing face-to-face contact whenever possible is strongly encouraged. These temporary policy changes offer flexibility for providers to meet the needs of beneficiaries through alternative means while protecting the health and welfare of both parties.

None of the following options outlined in this policy allow a nursing facility to use more beds than the number for which it is licensed. Any increase in nursing facility beds is managed by the Department of Licensing and Regulatory Affairs (LARA). Guidance on cost-reporting will be provided in future Michigan Department of Health and Human Services (MDHHS) communication.

In response to the COVID-19 crisis and in anticipation of increasing demands on nursing facilities, the options below are available to nursing facilities that serve Medicaid beneficiaries. This policy will be in effect through the month of April 2020 or until the first of the month following the termination of the Governor's Declaration of a State of Emergency Order (2020-04, COVID-19), whichever is later. Nursing facility residents using beds that are affected by this policy may remain in those beds until a transfer does not pose a threat to the resident's health status.

In order to provide the isolation or create the capacity to effectively respond to the COVID-19 conditions, nursing facilities may use any or all of the following options:

- Medicaid residents may be placed in a Medicare-certified bed without submitting a request for Medicaid bed certification. A request would be submitted after the Emergency Order (2020-04, COVID-19) ends, with retroactive effective dates.
- Nursing facilities with a non-available bed plan may use those beds without prior approval. The non-available bed plan will be negated effective the date any of the non-available beds were used. The provider must notify MDHHS Long Term Care Reimbursement and Rate

Setting Section in writing within 30 days of the use of non-available beds. Failure to do so will render the non-available bed plan negated to the original effective date.

- Resident rooms that were converted for other purposes can be re-converted to resident use.
- A single room can be converted to a semi-private room if it is large enough to allow for proper care procedures.
- If a facility determines that the most effective way to control the spread of the virus is to group residents who test positive or isolate residents, the facility may move residents independent of the distinct part requirements.

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:

Attn: Steve Bolin
E-mail: BolinS1@michigan.gov

If responding by e-mail, please include "COVID-19 Response: Options for the Use of Nursing Facility Beds" in the subject line.

Comments received will be considered for revisions to the change implemented by this bulletin.

Manual Maintenance

Information is time-limited and will not be incorporated into any policy or procedure manuals.

Questions

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

Approved



Kate Massey, Director
Medical Services Administration