MEDICAID POLICY INFORMATION SHEET

Policy Analyst: Katelynn Thornton **Phone Number**: 517-241-4080 Final | | Public Comment | | Initial Brief description of policy: This bulletin notifies nursing facility providers of temporary policy changes regarding Non Available Bed Plans. These changes allow nursing facilities to be more selective in their nonavailable bed designations, extend submission deadlines, reduce ineligibility, and provide penalty and return to service exceptions when handling COVID-19 related issues. The effective date for having a non-available bed plan under this policy is October 1, 2021. These changes will remain in effect until September 30, 2024. Reason for policy (problem being addressed): Due to the impacts of COVID-19, the demand for available beds is frequently changing for nursing facilities. A surge or waning of COVID-19 cases leads to an increase or decrease in the need for available beds. Inability to respond to these fluctuations can leave nursing facilities unable to meet the need for available beds. The proposed changes to the non-available bed plan policy allows nursing facilities to respond to the changing demands more quickly and frequently. **Budget implication:** □ budget neutral will cost MDHHS \$, and (select one) budgeted in current appropriation will save MDHHS Is this policy change mandated per federal requirements? No Does policy have operational implications on other parts of MDHHS? No Does policy have operational implications on other departments? No Summary of input: controversial acceptable to most/all groups limited public interest/comment **Supporting Documentation:** State Plan Amendment Required: Yes \bowtie No Public Notice Required: X Yes No If Yes, please provide status: Approved Pending Denied If yes, Date: Approval Submission Date: Date:

1/18 Policy Info Sheet

DRAFT FOR PUBLIC COMMENT						
Michigan Department of						
Health and Human Service		Project Number: 2	147-	-NF Date: October 26, 2021		
Comments Due: Proposed Effective Date: Direct Comments To: Address:	As lı	ember 30, 2021 ndicated elynn Thornton				
E-Mail Address: Phone:		rntonK2@michigan.g -241-4080	<u>ov</u>	Fax:		
Policy Subject: COVID-19 Response: Changes to Non-available Bed Plan Policy						
Affected Programs: Medicaid						
Distribution: Nursing Facilities						
Summary: This bulletin notifies nursing facility providers of temporary policy changes regarding Non-Available Bed Plans. These changes allow nursing facilities to be more selective in their non-available bed designations, extend submission deadlines, reduce ineligibility, and provide penalty and return to service exceptions when handling COVID-19 related issues. The effective date for having a non-available bed plan under this policy is October 1, 2021. These changes will remain in effect until September 30, 2024.						
Purpose: Due to the impacts of COVID-19, the demand for available beds is frequently changing for nursing facilities. A surge or waning of COVID-19 cases leads to an increase or decrease in the need for available beds. Inability to respond to these fluctuations can leave nursing facilities unable to meet the need for available beds. The changes to the non-available bed plan policy allow nursing facilities to respond to the changing demands more quickly and frequently.						
Cost Implications: Budget neutral.						
Potential Hearings & Appeal Issues: State Plan Amendment Required: Yes ☐ No ☒ Public Notice Required: Yes ☐ No ☒						
If yes, date submitted: Submitted Sub						
Tribal Notification: Yes ⊠ No □ - Date:						
THIS SECTION COMPLETED BY RECEIVER						
☐ Approved				Comments		
☐ Disapproved				e Comments Below e Comments in Text		
Signature:			F	Phone Number		

Signature Printed:	
Bureau/Administration (please print)	Date

Comment001 Revised 6/16



Bulletin Number: MSA 21-43

Distribution: Nursing Facilities

Issued: October 26, 2021

Subject: COVID-19 Response: Changes to Non-Available Bed Plan Policy

Effective: As Indicated

Programs Affected: Medicaid

This bulletin notifies nursing facility providers of temporary policy changes regarding Non-Available Bed Plans. These changes allow nursing facilities to be more selective in their non-available bed designations, extend submission deadlines, reduce ineligibility, and provide penalty and return to service exceptions when handling COVID-19 related issues. The effective date for having a non-available bed plan under this policy is October 1, 2021. These changes will remain in effect until September 30, 2024.

Non-available Beds

During this time, providers are allowed to designate individual beds within a room that are not being used for resident care as non-available.

Qualifying Criteria

There are no discrete area or contiguous physical arrangement requirements for the designation of a non-available bed. The common physical space within a room containing both non-available beds and available beds will not be designated as a non-available bed area.

Daily patient census records per bed must be maintained to ensure that non-available beds are not used for patient care. Failure to maintain daily census records by bed will negate the non-available bed arrangement.

Providers will now have 60 calendar days from the date that the provider removes the bed from service to submit the written non-available bed plan request.

Written Notice and Request for a Plan Approval

The Medicaid Reimbursement and Rate Setting Section (RARSS) must receive the request within 60 calendar days of the date that the beds are to be removed from resident care. RARSS will review the request and provide a written response of approval, denial, or a request

for additional information within 30 business days. If approved, RARSS will notify the Social Security Administration (SSA) of the non-available bed designation and effective period.

Life of an Approved Plan

Designated beds must remain non-available for a period of six months.

Non-available bed designations will be effective on the first day of the month. If the notice is not received within the required 60 calendar day period, the plan will become effective on the first day of the month in which RARSS received the notice if the beds have not been utilized during that month.

The nursing facility may request up to four extensions of six months each following this minimum period. A request for extension must be submitted in writing to the RARSS 30 calendar days prior to expiration of the extension.

The 24-month ineligibility period that follows the expiration of the previously approved plan, during which providers cannot submit a new non-available bed plan, will be waived for the six-month non-available bed designation plans.

Change of Ownership

The new owner may apply to extend the plan by following the extension request policy as outlined in the Life of an Approved Plan subsection of this policy. This extension does not have to coincide with the facility's cost reporting period.

Amending a Plan

Plan amendments will not be allowed under these six-month non-available bed designation plans.

Penalty for Use of Non-available Beds

Admitting residents to any beds designated non-available for occupancy, regardless of payer source, before the end of the plan negates the non-available bed plan. The exception to that penalty requirement will be beds used for care to address issues with COVID-19.

Returning Beds to Service

In special circumstances, such as a sudden increase in demand due to closure of a nearby facility or to address COVID-19, non-available beds may be returned to service before the end of the approved plan with prior approval of RARSS.

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 to Katelynn Thornton via e-mail at thorntonk2@michigan.gov.

Please include "COVID-19 Response: Changes to Non-available Bed Policy" in the subject line.

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

Manual Maintenance

Information in this bulletin 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 questions, be sure to include your name, affiliation, NPI number, and phone number so you may be contacted if necessary. Typical Providers may phone toll-free 1-800-292-2550. Atypical Providers may phone toll-free 1-800-979-4662.

Approved

K.M.

Kate Massey, Director

Medical Services Administration