

## Notes from 9/15/10 Task Force Meeting Special Act 10-7

*There is established a task force to study the period of time Medicaid recipients remain in acute care hospitals before transfer to a long-term care facility. Such study shall include, but not be limited to, an examination of:*

- 1. The reasons a Medicaid recipient may remain in an acute care hospital for an extended period of time;*
- 2. The barriers preventing transfer of some Medicaid recipients to long-term care facilities;*
- 3. The federal agency approvals and policy procedures changes required to facilitate the transfer of Medicaid recipients from acute care hospitals to long-term care facilities in a timely manner; and*
- 4. Clinical standards and state licensure requirements that may prevent or facilitate such transfer of Medicaid recipients.*

The task force began to look at the issue of delayed hospital discharge by reviewing a data sample collected from acute care hospitals by DSS. The data has some limits in that it only represented a portion of the state's hospitals (16 of 29 hospitals) and was collected during the summer when there are traditionally less hospital discharges. DSS offered to extrapolate and/or sort the data in any way that might be helpful.

- DSS was asked to extrapolate findings to estimate the results if all 29 hospitals had responded.
- It was also suggested that DSS ask hospitals that did not initially respond for the data again and that the hospitals could send annual data if it is available.
- DSS was asked to look into the details of the "no offer for appropriate nursing facility bed" responses.
- Anne Foley volunteered to send DDS the information regarding the delays in DDS placement. While this type of placement is outside of the charge of this task force, the data results were of concern.

The data appeared to show an array of issues that were causing a delay in discharge, but the task force will focus on what would be considered an appropriate discharge of a Medicaid recipient to a skilled nursing facility level of care. Therefore the following findings were identified for further investigation:

### **Regulatory Issues**

Conservatorship – Delays in the appointment of conservators and then the process of placement once the conservator has been appointed. *Task force will ask a representative of the Probate Court Administration to present or sit on the task force in an ex-officio member.*

Medicaid Eligibility Process – Delays in granting Medicaid are causing a long period of "pending Medicaid status" which can be a barrier to placement. *Task force may ask DSS personnel to provide insight into these regulatory delays. Mr. Richter did explain that DSS is currently implementing some technology upgrades that are intended to improve the process.*

**Service Related Issue**

Complex needs – Admission of a resident requires the nursing facility to make a reasoned admission decision and a potential resident's complex needs may be a barrier to finding a nursing facility that can care for that resident. Complex needs can be further defined as both physical care needs and mental health/behavior care needs. *Task force will ask Kathy Bruni of the Alternate Care Unit to address the new Ascend PASRR and level of care screening process that is now mandatory for a hospital discharge to a skilled nursing facility to determine if this is in any way causing delays in nursing home placements.* The data indicates a minor delay, but the task force thought it was worth determining whether this screening process was at all an issue. *At the suggestion of Wendy Furniss, the task force would also like to speak with Brenda Parrella from DSS about nursing home resident transfer and discharge issues.*

**Reimbursement**

Payer source – Lack of an adequate payer source, including a pending Medicaid status, can be a barrier to finding a nursing home placement. Reimbursement may also be a factor in determining whether a nursing facility can afford to admit and provide the necessary services required to care for a resident with complex needs.