

DEPARTMENT OF HEALTH AND HUMAN SERVICES
Centers for Medicare & Medicaid Services



Official CMS Information for
Medicare Fee-For-Service Providers

Swing Bed Services



RURAL HEALTH FACT SHEET SERIES

This publication provides the following information about swing bed services:

- ❖ Background;
- ❖ Requirements that apply to hospitals;
- ❖ Requirements that apply to Critical Access Hospitals (CAH);
- ❖ Swing bed services payments; and
- ❖ Resources.

Background

Hospitals, as defined in Section 1861(e) of the Social Security Act, or CAHs with a Medicare provider agreement that includes Centers for Medicare & Medicaid Services (CMS) approval to furnish swing bed services, may use their beds as needed to furnish either acute or Skilled Nursing Facility (SNF)-level care.

Rural hospitals and CAHs that have swing bed approval increase Medicare beneficiary access to post-acute SNF care and maximize the efficiency of operations by meeting unpredictable demands for acute and long-term care.

Hospitals that are paid under the Acute Care Hospital Inpatient Prospective Payment System (IPPS) and CAHs may use any acute care bed within the hospital or CAH (with the exception of beds within their IPPS excluded rehabilitation or psychiatric unit, beds in an intensive care-type unit, or beds for newborns) for the provision of swing bed services.

Medicare beneficiaries must receive acute care as a hospital or CAH inpatient for a medically necessary

stay of at least three consecutive calendar days in order to qualify for coverage of SNF-level services.

Requirements That Apply to Hospitals

In order to be granted, and retain, approval to furnish post-acute level SNF care via a swing bed agreement, hospitals must:

- ❖ Be located in a rural area, which includes all areas that are not delineated as urbanized by the U.S. Census Bureau based on the most recent census for which data is published (an urbanized area does not include an urban cluster);
- ❖ Have fewer than 100 beds (excluding beds for newborns and intensive care-type units);
- ❖ Have a Medicare provider agreement as a hospital;
- ❖ Have not had a swing bed approval terminated within the two years previous to submission of the current application for swing bed approval;

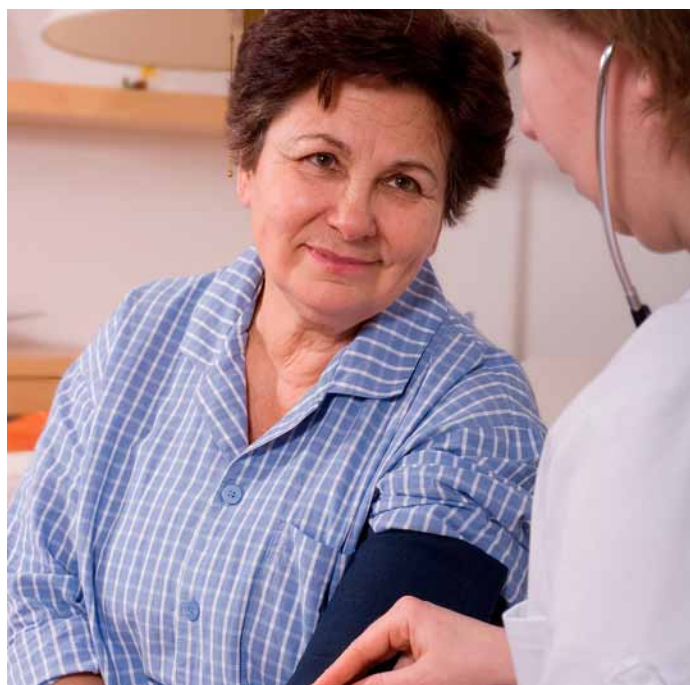


- ❖ Not have a nursing waiver granted as specified in the “Code of Federal Regulations” (CFR) at 42 CFR 488.54(c); and
- ❖ Be substantially in compliance with the following SNF participation requirements as specified at 42 CFR 482.66(b)(1–8):
 - Residents’ rights;
 - Admission, transfer, and discharge rights;
 - Resident behavior and facility practices;
 - Patient activities;
 - Social services;
 - Discharge planning;
 - Specialized rehabilitative services; and
 - Dental services.

Requirements That Apply to Critical Access Hospitals

CAHs must be substantially in compliance with the following SNF participation requirements as specified at 42 CFR 485.645(d)(1–9):

- ❖ Residents’ rights;
- ❖ Admission, transfer, and discharge rights;
- ❖ Resident behavior and facility practices;
- ❖ Patient activities (with exceptions for director of services);
- ❖ Social services;
- ❖ Comprehensive assessment, comprehensive care plan, and discharge planning (with some exceptions);



- ❖ Specialized rehabilitative services;
- ❖ Dental services; and
- ❖ Nutrition.

A CAH may maintain no more than 25 inpatient beds. When a CAH has Medicare approval to furnish swing bed services, it may use any of its 25 inpatient beds for either acute care or SNF-level care. A CAH may also be certified to have an additional 10 beds each in a psychiatric or rehabilitation distinct part unit (DPU); however, a bed that is within a CAH psychiatric or rehabilitation DPU may not be used for swing bed services.

Swing Bed Services Payments

Effective with cost reporting periods beginning on or after July 1, 2002, hospitals offering swing bed services (excluding CAHs) are paid for their SNF-level services under the SNF PPS. The SNF PPS covers all costs (ancillary, routine, and capital) related to covered services furnished to Medicare beneficiaries under a Medicare Part A covered SNF stay, with the exception of certain specified services that are separately billable under Part B.

CAHs that offer swing bed services are exempt from the SNF PPS and are instead reimbursed for their SNF-level services based on 101 percent of the reasonable cost of the services.

Resources

For more information about swing bed services, visit http://www.cms.gov/SNFPSPS/03_SwingBed.asp on the CMS website. You may also refer to Chapter 8 of the “Medicare Benefit Policy Manual” (Publication 100-02) and Chapter 6 of the “Medicare Claims Processing Manual” (Publication 100-04) located at <http://www.cms.gov/Manuals/IOM/list.asp> and the “Skilled Nursing Facility” section of the Medicare Learning Network® publication titled “MLN Guided Pathways to Medicare Resources Provider Specific” booklet at http://www.cms.gov/MLNEdWebGuide/Downloads/Guided_Pathways_Provider_Specific_Booklet.pdf on the CMS website. For more information about “CFR” citations, refer to the “CFR” located at <http://www.gpo.gov/fdsys/search/home.action> on the U.S. Government Printing Office website. To find the compilation of Social Security laws, visit http://www.ssa.gov/OP_Home/ssact/title18/1800.htm on the U.S. Social Security Administration website. To find Medicare information for beneficiaries (e.g., Medicare basics, managing health, and resources), visit <http://www.medicare.gov> on the CMS website.

Helpful Websites

American Hospital Association Rural Health Care

<http://www.aha.org/advocacy-issues/rural>

Critical Access Hospitals Center

<http://www.cms.gov/center/cah.asp>

Disproportionate Share Hospital

http://www.cms.gov/AcuteInpatientPPS/05_dsh.asp

Federally Qualified Health Centers Center

<http://www.cms.gov/center/fqhc.asp>

Health Resources and Services Administration

<http://www.hrsa.gov>

Hospital Center

<http://www.cms.gov/center/hospital.asp>

HPSA/PSA (Physician Bonuses)

<http://www.cms.gov/hpsapsaphysicianbonuses>

Medicare Learning Network

<http://www.cms.gov/MLNGenInfo>

National Association of Community Health Centers

<http://www.nachc.org>

National Association of Rural Health Clinics

<http://www.narhc.org>

National Rural Health Association

<http://www.ruralhealthweb.org>

Rural Health Clinics Center

<http://www.cms.gov/center/rural.asp>

Rural Assistance Center

<http://www.raonline.org>

Swing Bed Providers

http://www.cms.gov/SNFPPS/03_SwingBed.asp

Telehealth

<http://www.cms.gov/Telehealth>

U.S. Census Bureau

<http://www.census.gov>

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Below is a list of contact information for CMS Regional Office Rural Health Coordinators who provide technical, policy, and operational assistance on rural health issues.

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