



State of Louisiana

Louisiana Department of Health
Bureau of Health Services Financing

MEMORANDUM

TO: LOUISIANA NURSING FACILITIES

FROM: JEN STEELE, MEDICAID DIRECTOR
LDH, Bureau of Health Services Financing

TARA LEBLANC, ASSISTANT SECRETARY
LDH, Office of Aging and Adult Services

CECILE CASTELLO, DIRECTOR
LDH, Health Standards Section

RE: NURSING HOME ISSUES
A. BED CAPACITY
B. MEDICAID VENDOR PAYMENTS
C. ADMISSION REQUIREMENTS

DATE: AUGUST 29, 2017

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Hurricane Harvey struck Texas on August 25, 2017. Considering the impacts and effects of this Category 4 hurricane on the residents of Texas and Louisiana, and the need to coordinate care, services, treatment, and placement for evacuees, Louisiana will allow for the following current relief to licensed Louisiana nursing facilities:

A. LICENSED BED CAPACITY:

A-1. In the event that a host nursing facility receives nursing facility residents from an evacuating nursing facility, the host nursing facility will

be allowed to exceed its licensed bed capacity for a maximum of five (5) days, but only to the extent that essential care and services are provided to all residents and that the needs of all residents are met.

A-2. A host nursing facility may request one extension, not to exceed fifteen (15) days, to continue to exceed its licensed bed capacity.

a. A host nursing facility shall submit the extension request in writing to the LDH Health Standards Section (Attn: Cecile Castello, Email: Cecile.Castello@La.Gov or Fax Number: 225-342-5073) prior to the expiration of the original five day period.

b. The extension request shall be based upon information that the evacuating nursing facility's residents will return to the evacuating nursing facility's licensed location or be placed in alternate licensed nursing home beds within the extension period requested.

c. The extension shall only be granted for good cause shown and for circumstances beyond the control of the host nursing facility.

d. The extension shall be granted only if essential care and services to residents are ensured at the host nursing home, and only if the host nursing home can meet the needs of all residents.

A-3. Upon the expiration of the five days or upon the expiration of the written extension granted to the host nursing facility, the host nursing facility shall immediately return to its licensed bed capacity.

A-4. In the event that the resident cannot return to the evacuated nursing facility or cannot reasonably be placed in another nursing facility with an available licensed bed during the extension period, the host nursing facility may apply for a temporary hardship exception to the licensed bed capacity.

a. The host nursing facility shall submit a written temporary hardship exception request to the LDH Health Standards Section (Attn: Cecile Castello, Email: Cecile.Castello@La.Gov or Fax Number: 225-342-5073) prior to the expiration of the original five day period or prior to the expiration of any extension granted.

b. The temporary hardship exception may be granted by the Department for a period not to exceed fifteen (15) days.

c. The temporary hardship exception shall be granted only if essential care and services to the residents are ensured at the host nursing facility, and only if the host nursing facility can meet the needs of all residents.

B. MEDICAID VENDOR PAYMENTS

Note: This applies to residents that have Louisiana Medicaid coverage.

B-1. When a resident is evacuated to a temporary shelter site (an unlicensed shelter site or a licensed nursing facility) for less than 24 hours, the Medicaid vendor payment to the evacuating facility will not be interrupted.

B-2. When a resident is evacuated to a temporary shelter site (an unlicensed sheltering site or a licensed nursing facility) for greater than 24 hours, the evacuating nursing facility may submit claim for Medicaid vendor payment for the services provided at the host nursing facility for a maximum of five days, provided that the evacuating nursing facility provides sufficient staff and resources to ensure the delivery of essential care and services to the resident.

B-3. When a resident is evacuated to a temporary shelter site which is an unlicensed sheltering site for greater than 5 days, the evacuating nursing facility may submit claim for Medicaid vendor payment for up to an additional 15 days, provided that:

- a. The evacuating nursing facility has received an extension to stay at the unlicensed sheltering site; and
- b. The evacuating nursing facility provides sufficient staff and resources to ensure the delivery of essential care and services to the resident and to ensure the needs of the resident are met.

B-4. When a resident is evacuated to a temporary shelter site which is a licensed nursing facility for greater than 5 days, the evacuating nursing facility may submit claim for Medicaid vendor payment for an additional period, not to exceed 55 days, provided that:

- a. The host/receiving nursing facility has sufficient licensed and certified bed capacity for the resident or the host/receiving nursing facility has received Departmental and/or CMS approval to exceed the licensed and certified bed capacity for a specified period; and
- b. The evacuating nursing facility provides sufficient staff and resources to ensure the delivery of essential care and services to the resident and to ensure the needs of the resident are met.

B-5. If a resident is evacuated to a temporary shelter site which is a licensed nursing facility, the receiving/host nursing facility may submit claims for Medicaid vendor payment as follows:

- a. Beginning Day 2 and continuing during the “sheltering period” and any extension period, if the evacuating nursing facility does not provide sufficient staff and resources to ensure the delivery of essential care and services to the resident and to ensure the needs of the residents are met; or
- b. Upon admission of the evacuated residents to the host/receiving nursing facility; or
- c. Upon obtaining approval of a temporary hardship exception from the Department, if the evacuating nursing facility is not submitting claims for Medicaid vendor payment.

B-6. Only one nursing facility may submit claims and be reimbursed by the Medicaid Program for each Medicaid resident for the same date of service.

B-7. A nursing facility may not submit claims for Medicaid vendor payment for non-admitted residents beyond the expiration of its extension to exceed licensed (and/or certified) bed capacity or expiration of its temporary hardship exception.

B-8. At this time, the Department is issuing no guidance on whether a nursing facility will be allowed to exceed its facility need review approvals when submitting claims for Medicaid vendor payment. The Department will seek direction from the Centers for Medicare and Medicaid services on this issue, on a case by case basis.

***B-9 applies to Texas Medicaid Recipients that are evacuated to licensed Louisiana Nursing Homes but not eligible for Louisiana Medicaid**

B-9. Subject to CMS approvals and other applicable state law and federal regulations, Louisiana Medicaid will explore the possibility of Louisiana Nursing Homes possibly receiving reimbursement from Texas Medicaid for medical care provided to Texas Medicaid recipients. Louisiana Medicaid is not obligated to provide reimbursement for care provided to Texas Medicaid recipients in Louisiana Nursing Homes. Such exploration will include the possibility of Louisiana Nursing Homes temporarily enrolling as Texas Medicaid providers in order to possibly receive reimbursement from Texas.

C. NURSING HOME ADMISSION REQUIREMENTS

C-1. For any new admissions to a nursing facility directly related to Hurricane Harvey:

- a. The referral source contacts Louisiana Options in Long Term Care at 1-877-456-1146 to complete the LOCET.
- b. A trained and certified Intake Analyst will conduct the LOCET interview.
- c. Inform the Intake Analyst the applicant is a "Harvey Evacuee."
- d. The referral source must submit a copy of the Level 1 PASRR to the Nursing Facility Admissions Section via statewide Right Fax number to 225-389-8197 or 225-389-8198.
- e. OAAS Nursing Facility Admissions Section will expedite the review process once all components, which include a completed LOCET and a completed Level 1 form, are received.

C-2. For other routine (Non-hurricane related) admissions, the same process above will apply.

C-3. In order for providers to obtain Medicaid financial reimbursement, all admissions have to meet all financial and level of care requirements.

C-4. To expedite the transfer of persons from shelters to nursing facilities after Hurricane Harvey, Office of Public Health (OPH) staff (nursing or DIS) may administer a tuberculin PPD skin test. The skin test must be read 48-72 hours after administration, and may be read by OPH staff (if patient is still in shelter) or by the nursing facility staff (if already admitted there). Nursing Facility admissions do not have to be held up pending the results of the required TB skin test, but the PPD must be read 48 to 72 hours after administration. The test must still be performed. If the medical record indicates the resident has previously tested positive, a Mantoux PPD should not be performed. A Chest X-Ray would also be performed.

C-5. Temporary Absence Due to Evacuation – Leave Day Policy

- a. When the resident is evacuated for less than twenty-four (24) hours, the monthly vendor payment is not interrupted.
- b. When the staff is sent with the resident(s) to the evacuation site, the monthly vendor payment to the facility is not interrupted, subject to Section B (Medicaid Vendor Payments) of this Memo.

- c. When the resident is evacuated to a family or friend's home, at the facility's request, the facility shall not submit a claim for a day of service or leave day, and patient liability should not be collected.
- d. When the resident goes home at the family's request or on their own initiative, a leave day shall be charged.
- e. Temporary absence due to an emergency evacuation will not constitute the immediate need for a patient discharge.

If additional information is required regarding licensed bed capacity, extensions or hardships, please contact Health Standards Section at (225) 342-4997.

If additional information is required regarding Medicaid vendor payments, please contact Denis Beard at Louisiana Medicaid at (225) 342-3613.

If additional information is required regarding the admission process, please contact OAAS Nursing Facility Admissions at (337) 262-1664.