

Holiday Visits and Gifts

With the holidays fast approaching questions inevitably arise concerning a resident's right and ability to leave a nursing facility. The Office of the State Long Term Care Ombudsman supports the rights of residents to be able to participate in family events of their choice and believes that these types of visits away from the facility can contribute to their positive wellbeing and quality of life and should be supported and encouraged. Residents often want to join in family festivities but may believe that leaving a nursing facility for a period of time is not an option because they may lose their source of payment from Medicare, Medicaid, or a long term care insurance policy or lose their room all together. These are excellent concerns to check into ahead of time.

It is important to understand that nursing facilities are allowed to bill residents to hold their beds while they are out of the facility. Before proceeding, all residents should review the payment systems rules and their admission contract agreement.

Medicare payment: The Medicare Benefit Policy Manual recognizes that although most beneficiaries are unable to leave their facility, an outside pass or short leave of absence for the purpose of attending a special religious service, holiday meal, family occasion or a trial visit home is not, by itself evidence, that the individual no longer needs to be in a skilled nursing facility.

Medicaid payment: The Department of Human Services (DHS) Medicaid Income Maintenance Manual states that facilities "will be paid to hold the bed while the resident is visiting away from the facility for a period not to exceed 18 days in any calendar year. These 18 days may be taken at any time. There is no restriction as to the amount of days taken in any one month or on any one visit, as long as the days taken in the calendar year do not exceed 18".

It goes on to state that "Additional days will be allowed if the resident's physician recommends in the plan of care that additional days would be rehabilitative. The physician's recommendation should be available at the facility for audits. Visit days cannot be used to extend payments for hospital stays".

Private payment: Residents who are paying privately for their stay and care should refer to the facility's written bed hold policy as well as their admission agreement. The facility is required to provide the resident with the written policy prior to their leaving the facility for an overnight visit so that there are no questions concerning possible billing for the time away from the facility.

Long term care insurance: For residents receiving long term care insurance or other benefits, their individual policies should be referred to concerning the entities agreement to pay the facility during a leave. It should be understood that not all policies will pay for such leave and the resident or responsible party may be billed personally for the time away from the facility depending upon the facilities bed hold policy.

Gifts: Another issue that can cause some questions revolves around the issue of gifts received by residents and if they count as reportable income under Medicaid. According to the DHS Medicaid Income Maintenance Manual (Chapter 8), cash gifts are excluded if they are considered "infrequent or irregular". This means that the gift is "irregular income" if the quarterly amount does not exceed \$30 for earned income or \$60 for unearned income. Additionally "The value of any noncash item (other than food, clothing, or shelter) is not considered income if it will be partially or totally excluded as a resource the month after the receipt of the gift".

For more information or questions regarding overnight visits please contact your local Long Term Care Ombudsman or the Office of the State Long Term Care Ombudsman at 1-866-236-1430.