



Swing Bed



A HOSPITAL OR CRITICAL ACCESS HOSPITAL (CAH) with a Medicare agreement to furnish swing bed services may use its beds as needed to furnish either acute or Skilled Nursing Facility (SNF) level care. In order to be granted approval to furnish post-acute level SNF care via a swing bed agreement, the following requirements must be met:

- For a hospital:
 - The hospital is located in a rural area;
 - The hospital has fewer than 100 beds (excluding beds for newborns and intensive care-type units);
 - The hospital has a Medicare provider agreement, as a hospital;
 - The hospital is substantially in compliance with the following SNF participation requirements:
 - Residents rights;
 - Admission, transfer, and discharge rights;
 - Resident behavior and facility practices;
 - Patient activities;
 - Social services;
 - Discharge planning;
 - Specialized rehabilitative services; and
 - Dental services;
 - The hospital has not had a nursing waiver granted as stated in the **Code of Federal Regulations (CFR)** under 42 CFR Section 488.54(c); and;
 - The hospital has not had a swing bed approval terminated within the two years previous to application for participation.

- Residents rights;
- Admission, transfer, and discharge rights;
- Resident behavior and facility practices;
- Patient activities (except for direction);
- Social services;
- Comprehensive assessment, comprehensive care plan, and discharge planning (with some exceptions);
- Specialized rehabilitative services;
- Dental services; and
- Nutrition.



A CAH may provide 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. Any bed that is within a CAH distinct part unit that is Medicare certified to furnish SNF, rehabilitation, or psychiatric care does not count as part of its maximum 25 inpatient beds.

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.

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.

Effective with cost reporting periods beginning on or after July 1, 2002, swing bed hospitals (other than CAHs) are paid for their SNF-level services under the SNF Prospective Payment Systems (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. Swing bed CAHs are exempt from the SNF PPS and are instead reimbursed for their SNF-level services on a reasonable cost basis.

To find additional information about swing bed services, see Chapter 6 of the **Medicare Claims Processing Manual** (Pub. 100-4) and Chapter 8 of the **Medicare Benefit Policy Manual** (Pub. 100-2) at <http://www.cms.hhs.gov/Manuals> and visit http://www.cms.hhs.gov/SNFPPS/03_SwingBed.asp on the Centers for Medicare & Medicaid Services (CMS) website. To access the CFR, visit <http://www.gpoaccess.gov/cfr/index.html> on the Web.

HELPFUL WEBSITES

American Hospital Association Section for Small or Rural Hospitals

http://www.aha.org/aha/key_issues/rural/index.html

Critical Access Hospital Center

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

Federally Qualified Health Centers Center

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

Health Resources and Services Administration

<http://www.hrsa.gov>

Hospital Center

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

HPSA/PSA (Physician Bonuses)

http://www.cms.hhs.gov/hpsapsaphysicianbonuses/01_overview.asp

Medicare Learning Network

<http://www.cms.hhs.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.nrharural.org>

Rural Health Center

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

Rural Assistance Center

<http://www.raconline.org>

Telehealth

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

U.S. Census Bureau

<http://www.Census.gov>

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