KNOW YOUR RIGHTS: WHAT IF A RESIDENT IS TOLD THEY CANNOT LEAVE A NURSING FACILITY WHILE ON MEDICAID OR MEDICARE?



Nursing home residents using Medicaid or Medicare to fund their stay are able to temporarily leave the facility for family events or other personal trips without losing coverage.

ACCORDING TO FLORIDA MEDICAID LAW:

- A therapeutic leave is when a recipient leaves their nursing home overnight for a non-medical reason, most commonly to visit family or friends.
- Medicaid will reimburse the facility for up to 16 therapeutic leave days between July 1 and June 30 of the following year as long as the resident is expected to return.

ACCORDING TO THE FEDERAL MEDICARE POLICY MANUAL:

- A short leave of absence to attend a special religious service, holiday meal, family occasion, go on a car ride, or visit home for a trial is not, by itself, evidence that the resident no longer needs to be in a skilled nursing facility.
- It is inappropriate for a facility to notify residents that leaving will result in denial of coverage.
- If a resident temporarily leaves and returns to the facility by midnight, the facility can bill Medicare for the day's stay.
- If the resident is gone overnight past midnight and returns to the facility the next day, it is considered a leave of absence.
- The facility can charge a beneficiary bed-hold fees during a temporary SNF absence.



ON THE FACILITY AMPLE
NOTICE IF YOU ARE
PLANNING TO TAKE A
LEAVE OF ABSENCE TO
PREVENT UNEXPECTED
COSTS OR LAPSES IN CARE

The facility must give Medicaid recipients and their representatives a written copy of the leave policy when admitted and when they leave for hospitalization or therapeutic reasons.

The facility must also inform
Medicare recipients about its bedhold rates beforehand and can only
charge them if the resident has
agreed to pay those fees in advance.

PLEASE <u>CONTACT</u> THE LONG-TERM CARE OMBUDSMAN PROGRAM IF YOU ARE BEING TOLD YOU CANNOT LEAVE YOUR FACILITY WITHOUT LOSING COVERAGE



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