



Subject: Extended Care Facilities

Revision Date: 12/22

DESCRIPTION

According to the OSU Faculty and Staff Health Plans Specific Plan Details (SPD), Extended Care Facilities (ECF) are covered up to 60 days per calendar year. This benefit also includes Skilled Nursing Facilities (SNF). This policy differentiates these two types of facilities and sets forth criteria for each.

DEFINITIONS

Custodial Care: Care that is primarily for the purpose of assisting an individual in the activities of daily living or in meeting personal needs. It is not skilled care and does not require the continuing attention or supervision of trained medical personnel. For example, custodial care serves to assist an individual with walking, getting in and out of bed, bathing, dressing, feeding, using the toilet, preparation of special diets, and supervision of medication that usually can be self-administered. It includes maintenance care provided by family members, health aides or other unlicensed individuals after a medical event, including behavioral health events, when an individual has reached the maximum level of physical or mental function.

Extended Care/Skilled Nursing Facility [SPD definition]: A facility providing mainly inpatient skilled nursing and related services to patients requiring convalescent and rehabilitative care. Such care is given by or under the supervision of physicians. An extended care facility is not, other than incidentally, a place that provides minimal custodial care, ambulatory or part-time care or that provides treatment for mental illness, alcoholism, drug abuse, or tuberculosis. The Medicare program must certify the extended care facility.

Extended Care Facility (ECF): Patient requires more assistance than custodial care, and may require nursing supervision, but do not have a true skilled need.

- SNF Level 1: May include up to 2 – 3 nursing hours per day and/or up to 1 hour of therapy

Skilled Care: Medically necessary care that can only be provided by or under the supervision of skilled or licensed medical personnel.

Skilled Nursing Facility (SNF): Patient has medical needs that must be performed by a skilled, licensed professional daily.

- Level 2: Generally, 3 – 5 nursing hours per day and up to 2 hours of therapy
- Level 3: Generally, up to 6 nursing hours per day and up to 3 hours of therapy
- Level 4: Generally, up to 8 nursing hours per day and over 3 hours of therapy

- Level 5: Generally reserved for extremely high acuity, such as weaning of ventilator dependent patients

POLICY

OSU Health Plan utilizes MCG® Recovery Facility Care guidelines to determine medical necessity of SNF days. Level of care is determined based on the above definition. A member is no longer appropriate for SNF when one or more of the following criteria are met:

- MCG® Recovery Milestones for discharge are met; or
- Member has reached plateau; or
- Skilled care needed is unlikely to end and has become maintenance care; or
- Member's condition has worsened and transfer to a higher level of care is necessary.

When a member is no longer appropriate for SNF level of care, but is unsafe for discharge, it is appropriate to allow remaining days at an ECF level of care. The ECF benefit level is intended as a transition period for the member to obtain other funding (i.e., Medicaid, Medicare, self-pay, etc.) or placement for long-term care. Once a member has utilized the ECF benefit as a transition to long-term care, he or she will not qualify for additional days during a new benefit year unless there has been a significant change in condition that meets MCG admission criteria for SNF level of care. A member is eligible for this transitional period if all the following criteria are met:

- Maintenance care that can only be provided by or under the supervision of skilled or licensed medical personnel; and
- Care needs are more continuous in nature than can be provided with intermittent home care; and
- Patient does not have caregiver who can provide supportive care needs (e.g., unavailable, persistent patient safety concerns despite caregiver training); and
- Gaining safe level of independence in function or ability to meet care needs is not anticipated due to nature of patient's condition.

According to the OSU Faculty and Staff Health Plans SPD, benefits are not provided for services, supplies, or charges for custodial care. Therefore, ECF for custodial care without skilled needs is not covered. In determining whether an individual is receiving custodial care, the factors considered are the level of care and medical supervision required and furnished. The decision is not based on diagnosis, type of condition, degree of functional limitation or rehabilitation potential. Examples of custodial care include, but are not limited to:

- Assistance in ADLs (dressing, eating, and toileting)
- Periodic turning and positioning in bed
- Prophylactic and palliative skin care, including bathing and application of creams, or treatment of minor skin problems
- Stable bolus feeding by nasogastric, gastrostomy or jejunostomy tube
- Routine care of the incontinent individual
- Routine services to maintain satisfactory functioning of indwelling bladder catheters
- General maintenance care of colostomy and ileostomy
- General supervision of a home exercise program
- Changing of dressings for non-infected postoperative or chronic conditions
- General maintenance care in connection with a plaster cast
- Routine care in connection with braces and similar devices
- Use of heat as a palliative and comfort measure

- Routine administration of medical gases after a regimen of therapy has been established
- Administration of routine oral medications, eye drops, and ointments that are typically self-administered
- Chronic uncomplicated oral or tracheal suctioning

PROCEDURE

Consistent with the Centers for Medicare and Medicaid Services, OSUHP will provide at minimum a 2 days' notice of denial of SNF/ECF days upon concurrent review. * This does not apply to benefit denials (i.e., benefit maximums, loss of coverage, benefit exclusions).

Level of Care is documented in the Care Management System (IHIS) utilizing the Day Type under the Bed Days form in the Referral.

The total number of SNF/ECF days utilized each benefit year is tracked in the Care Management System (IHIS) by adding a note in the Notes section of the Member Summary.

Refer to the Utilization Management Policies and Procedures for other applicable procedures.

EXCLUSIONS

OSU Health Plan does not cover the following services:

- SNF/ECF days beyond the benefit maximum
- ECF days for members who have previously utilized the full ECF benefit and have not had a change in condition necessitating SNF level of care
- Services specifically listed in the SPD as not covered (e.g., custodial care)

REVENUE CODES

019X Subacute Care
 0190 - General
 0191 - Level I 0192
 - Level II 0193 -
 Level III 0194 -
 Level IV 0199 -
 Other

REFERENCES

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