DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Medicare & Medicaid Services



Swing Bed Services



RURAL HEALTH FACT SHEET SERIES

This publication provides the following information about swing bed services:

- Background;
- Requirements that apply to hospitals;
- Requirements that apply to Critical Access Hospitals (CAH);
- Payments; and
- Resources.

Background

Hospitals, as defined in Section 1861(e) of the Social Security Act, or CAHs with a Medicare provider agreement that includes Centers for Medicare & Medicaid Services (CMS) approval to furnish swing bed services, may use their beds as needed to furnish either acute or Skilled Nursing Facility (SNF)-level care.

Rural hospitals and CAHs that have swing bed approval increase Medicare patient access to post-acute SNF care and maximize the efficiency of operations by meeting unpredictable demands for acute and long-term care.

Hospitals paid under the Acute Care Hospital Inpatient Prospective Payment System (IPPS) and CAHs may use any acute care bed within the hospital or CAH (with the exception of beds within their IPPS-excluded rehabilitation or psychiatric unit, beds in an intensive care-type unit, or beds for newborns) for the provision of swing bed services.

Medicare beneficiaries must receive acute care as a hospital or CAH inpatient for a medically necessary stay of at least three consecutive calendar days to qualify for coverage of SNF-level services.

Requirements That Apply to Hospitals

To be granted, and retain, approval to furnish post-acute level SNF care via a swing bed agreement, hospitals must:

- Be located in a rural area, which includes all areas that are not delineated as urbanized by the U.S. Census Bureau based on the most recent census for which data is published (an urbanized area does not include an urban cluster);
- Have fewer than 100 beds (excluding beds for newborns and intensive care-type units);





- Have a Medicare provider agreement as a hospital;
- Not have had a swing bed approval terminated within the two years previous to submission of the current application for swing bed approval;
- Not have had a nursing waiver granted as specified in the "Code of Federal Regulations" (CFR) at 42 CFR 488.54(c); and
- Be substantially in compliance with the following SNF participation requirements as specified at 42 CFR 482.66(b)(1-8):
 - Residents' rights;
 - Admission, transfer, and discharge rights;
 - Resident behavior and facility practices;
 - Patient activities;
 - Social services;
 - Discharge planning;
 - Specialized rehabilitative services; and
 - Dental services.

Requirements That Apply to Critical Access Hospitals (CAH)

CAHs must be substantially in compliance with the following SNF participation requirements as specified at 42 CFR 485.645(d)(1-9):

- Residents' rights:
- Admission, transfer, and discharge rights;
- Resident behavior and facility practices;
- Patient activities (with exceptions for director of services);
- Social services:
- Comprehensive assessment, comprehensive care plan, and discharge planning (with some exceptions);

- Specialized rehabilitative services;
- Dental services: and
- Nutrition.

A CAH may maintain 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. A CAH may also be certified to have an additional 10 beds each in a psychiatric or rehabilitation distinct part unit (DPU); however, a bed that is within a CAH psychiatric or rehabilitation DPU may not be used for swing bed services.

Payments

Effective with cost reporting periods beginning on or after July 1, 2002, hospitals offering swing bed services (excluding CAHs) are paid for their SNF-level services under the SNF 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.

CAHs offering swing bed services are exempt from the SNF PPS and are instead paid for their SNF-level services based on 101 percent of the reasonable cost of the services.



Resources

The chart below provides swing bed services resource information.

For More Information About	Resource
Swing Bed Services	http://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/SNFPPS/SwingBed.html on the CMS website
	Chapter 8 of the "Medicare Benefit Policy Manual" (Publication 100-02) located at http://www.cms.gov/Regulations-and-Guidance/Guidance/Manuals/Downloads/bp102c08.pdf on the CMS website
	Chapter 6 of the "Medicare Claims Processing Manual" (Publication 100-04) located at http://www.cms.gov/Regulations-and-Guidance/Guidance/Manuals/Downloads/clm104c06.pdf on the CMS website
"Code of Federal Regulations"	http://www.gpo.gov/fdsys/search/home.action on the U.S. Government Printing Office website
Compilation of Social Security Laws	http://www.ssa.gov/OP_Home/ssact/title18/1800.htm on the U.S. Social Security Administration website
All Available Medicare Learning Network® (MLN) Products	"Medicare Learning Network® Catalog of Products" located at http://www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNProducts/Downloads/MLNCatalog.pdf on the CMS website or scan the Quick Response (QR) code on the right
Provider-Specific Medicare Information	MLN publication titled "MLN Guided Pathways to Medicare Resources Provider Specific Curriculum for Health Care Professionals, Suppliers, and Providers" booklet located at http://www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNEdWebGuide/Downloads/Guided_Pathways_Provider_Specific_Booklet.pdf on the CMS website
Medicare Information for Beneficiaries	http://www.medicare.gov on the CMS website



Helpful Websites

American Hospital Association Rural Health Care

http://www.aha.org/advocacy-issues/rural

Critical Access Hospitals Center

http://www.cms.gov/Center/Provider-Type/Critical-Access-Hospitals-Center.html

Disproportionate Share Hospital

http://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/AcuteInpatientPPS/dsh.html

Federally Qualified Health Centers Center

http://www.cms.gov/Center/Provider-Type/Federally-Qualified-Health-Centers-FQHC-Center.html

Health Resources and Services Administration

http://www.hrsa.gov

Hospital Center

http://www.cms.gov/Center/Provider-Type/Hospital-Center.html

Medicare Learning Network®

http://go.cms.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.ruralhealthweb.org

Physician Bonuses

http://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/HPSAPSAPhysicianBonuses

Rural Assistance Center

http://www.raconline.org

Rural Health Clinics Center

http://www.cms.gov/Center/Provider-Type/Rural-Health-Clinics-Center.html

Swing Bed Providers

http://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/SNFPPS/SwingBed.html

http://www.cms.gov/Medicare/Medicare-General-Information/Telehealth

U.S. Census Bureau

http://www.census.gov

Regional Office Rural Health Coordinators

Below is a list of contact information for CMS Regional Office Rural Health Coordinators who provide technical, policy, and operational assistance on rural health issues.

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Please send your suggestions related to MLN product topics or formats to MLN@cms.hhs.gov.

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