



Purpose & Intent: To provide documentation that a physician has determined a discharge or transfer is necessary.

The Requirements of Participation (RoP) outline specific set of criteria that must be met prior to discharging or transferring a resident as well as the specific documentation that must be made and by whom (often by a physician). CMS says the "facility must permit each resident to remain in the facility, and not transfer or discharge the resident unless" they meet a set of specific criteria. The actual RoP language is contained on the last page of this tool.

To assure that the Center has followed all the required steps in determining if the resident meets criteria for discharge or transfer, AHCA staff recommend you create a template document for use in the medical record and a template order form for the physician to sign when a person is discharged or transferred. This tool does not outline the required information that must accompany a resident when discharged or transferred [see AHCA Tool: Information Accompanying Residents at Discharge or Transfer -483.15(c)(2)].

The checklist below captures the required information a Center will need to include in the medical record and in an order form to comply with the requirements. You will want to share this information with your medical director and attending physicians.

Tips on how to comply:

- Develop an internal template order/documentation form that physicians can sign whenever a person is discharged or transferred. (See next page)
- Meet with your medical director to review the new requirement and customize the template order/documentation form (Note: you can't customize by deleting or omitting any required information or steps).
- Have your medical director reach out to the attending physicians so they are aware of the new requirements.





Content of Template Order Form

Check the reason why the discharge or transfer is necessary (check all that apply): ☐ The resident's welfare and the resident's needs cannot be met in the facility; If so, specify o the specific resident's need(s) that cannot be met, o the facility attempts to meet the resident's needs, and o the services available at the receiving facility to meet the resident's need(s). Name of resident's physician: ☐ The resident's health has improved sufficiently so the resident no longer needs the services provided by the facility. Name of resident's physician: ☐ The safety of other individuals in the facility is endangered due to the clinical or behavioral status of the resident. Why the resident is endangered: Name of any physician making determination: ☐ The health of other individuals in the facility would otherwise be endangered. Why others are endangered: Name of any physician making determination: ☐ The resident has failed, after reasonable and appropriate notice, to pay or refused to pay for a stay at the facility **AND** the resident has not submitted the necessary paperwork for third party payment (e.g., Medicaid or Medicare). [Note: non-payment pending Medicaid eligibility does not justify transfer or discharge.] ☐ The facility is ceasing to operate. Note: A facility cannot discharge or transfer a resident when an appeal by the resident (and/or their representative) is pending unless the failure to discharge or transfer would

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endanger the health or safety of the resident or other individuals in the facility.





Criteria Determining the Need for Resident Discharge or Transfer

The RoP language for 483.15(c)1 is as follows: The facility must permit each resident to remain in the facility, and not transfer or discharge the resident unless:

- ✓ The transfer or discharge is necessary for the resident's welfare and the resident's needs cannot be met in the facility;
- ✓ The transfer or discharge is appropriate because the resident's health has improved sufficiently so the resident no longer needs the services provided by the facility;
- ✓ The safety of individuals in the facility is endangered due to the clinical or behavioral status of the resident;
- ✓ The health of individuals in the facility would otherwise be endangered.
- ✓ The resident has failed, after reasonable and appropriate notice, to pay for (or to have paid under Medicare or Medicaid) a stay at the facility. Nonpayment does not apply unless the resident does not submit the necessary paperwork for third party payment or until the third party, including Medicare or Medicaid, denies the claim and the resident refuses to pay for his or her stay. For a resident who becomes eligible for Medicaid after admission to a facility, the facility may charge a resident only allowable charges under Medicaid; or
- ✓ The facility ceases to operate.

Physician Documentation determining the need for **Resident Discharge or Transfer**

The RoP language for 483.21(c)1 is as follows: When the facility transfers or discharges a resident who meet any of the criteria for discharge, the facility must ensure that the transfer or discharge is document in the resident's medical record, which must include:

- ✓ The basis for the transfer per paragraph meting one of the above criteria.
- ✓ When the reason for "the transfer or discharge is necessary for the resident's welfare and the resident's needs cannot be met in the facility',
 - the specific resident need(s) that cannot be met,
 - o the facility attempts to meet the resident needs, and
 - o the services available at the receiving facility to meet the need(s).
- ✓ Documentation that the decision was made by the resident's physician when the reason for the transfer or discharge is for one of two reasons: "the transfer or discharge is necessary for the resident's welfare and the resident's needs cannot be met in the facility" OR "the transfer or discharge is appropriate because the resident's health has improved sufficiently so the resident no longer needs the services provided by the facility."
- ✓ Documentation that the decision was made by a physician when the transfer or discharge is necessary for one of two reasons: "The safety of individuals in the facility is endangered due to the clinical or behavioral status of the resident" OR "the health of individuals in the facility would otherwise be endangered."

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✓ For resident-initiated discharges, documentation or evidence of the resident's or resident representative's verbal or written notice of intent to leave the facility, a discharge care plan, and documented discussions with the resident or, if appropriate, his/her representative, containing details of discharge planning and arrangements for post discharge care [see AHCA Tool: Information Accompanying Residents at Discharge or Transfer – 483.15(c)(2)] and [see AHCA Tool: Discharge Planning Process - 483.21(c)(1)].