



**Program: Hospital**

**Chapter: Provision of Care, Treatment, and Services**

**PC.04.01.03: The hospital discharges or transfers the patient based on his or her assessed needs and the organization's ability to meet those needs.**

**Rationale:** Not applicable.

**Introduction:** Not applicable

**Elements of Performance**

- 1 The hospital begins the discharge planning process early in the patient's episode of care, treatment and services.

**EP Attributes**

New	FSA	CMS	MOS	CR	DOC	SC	ESP
		§482.43(a)	M			C	
		§482.43(b)(5)					
		§482.43(c)(2)					
		§482.43(c)(3)					
		§482.62					
		§482.62(a)(4)					
		§482.43(b)(6)					

- 2 The hospital identifies any needs the patient may have for psychosocial or physical care, treatment, and services after discharge or transfer.

**EP Attributes**

New	FSA	CMS	MOS	CR	DOC	SC	ESP
		§482.43(a)	M			C	
		§482.43(b)(1)					
		§482.43(b)(5)					
		§482.43(c)(2)					
		§482.43(c)(3)					
		§482.62					
		§482.62(a)(4)					
		§482.43(b)(4)					
		§482.43(b)(3)					
		§482.43(b)(6)					

- 3 The patient, the patient's family, licensed independent practitioners, physicians, clinical psychologists, and staff involved in the patient's care, treatment, and services participate in planning the patient's discharge or transfer.  
 Note 1: The definition of "physician" is the same as that used by the Centers for Medicare & Medicaid Services (CMS) (refer to the Glossary).

Note 2: For psychiatric hospitals that use Joint Commission accreditation for deemed status purposes: Social service staff responsibilities include, but are not limited to, participating in discharge planning, arranging for follow-up care, and developing mechanisms for exchange of information with sources outside the hospital.

Note 3: For hospitals that use Joint Commission accreditation for deemed status purposes and have swing beds: The hospital notifies the resident and, if known, a family member or legal representative of the resident of the transfer or discharge and reasons for the move in writing. The hospital also provides sufficient preparation and orientation to residents to make sure that transfer or discharge from the hospital is safe and orderly.

**EP Attributes**

New	FSA	CMS	MOS	CR	DOC	SC	ESP
		§482.43(b)(2)	M			C	
		§482.43(c)(1)					
		§482.43(c)(2)					
		§482.43(c)(3)					
		§482.62					
		§482.62(a)(4)					
		§482.62(f)(2)					
		§482.43(b)(4)					
		§482.43(b)(6)					
		§483.12(a)(7)					
		§483.12(a)(4)(i)					
		§483.12(a)(4)(iii)					
		§482.58(b)(2)					

- 4 Prior to discharge, the hospital arranges or assists in arranging the services required by the patient after discharge in

order to meet his or her ongoing needs for care and services.

**EP Attributes**

New	FSA	CMS	MOS	CR	DOC	SC	ESP
		§482.43(b)(5) §482.43(c)(2) §482.43(c)(3) §482.43(b)(4) §482.43(b)(3) §482.43(b)(6)	M			C	

- 5 For hospitals that use Joint Commission accreditation for deemed status purposes and have swing beds: Except when specified in the CoP from 42 CFR 483.12(a)(5)(ii), the written notice of transfer or discharge required under paragraph 42 CFR 483.12(a)(4) must be made by the hospital at least 30 days before the resident is transferred or discharged. Note: Notice may be made as soon as is practical before transfer or discharge when the safety of the individuals in the facility would be endangered; the health of the individuals in the facility would be endangered; the resident's health improves sufficiently to allow a more immediate transfer or discharge, and immediate transfer or discharge is required by the resident's urgent medical needs; or a resident has not resided in the facility for 30 days.

**EP Attributes**

New	FSA	CMS	MOS	CR	DOC	SC	ESP
		§483.12(a)(5)(i) §483.12(a)(5)(ii)(E) §482.58(b)(2)	M		D	C	ESP-1

- 6 For hospitals that use Joint Commission accreditation for deemed status purposes and have swing beds: The written notice before transfer or discharge specified in the CoP from 42 CFR 483.12(a)(4) includes the following:
- The reason for transfer or discharge
  - The effective date of transfer or discharge
  - The location to which the resident is transferred or discharged
  - A statement that the resident has the right to appeal the action to the state
  - The name, address, and telephone number of the state's long term care ombudsman
  - For a resident who is developmentally disabled, the mailing address and telephone number of the agency responsible for the protection and advocacy, established under Part C of the Developmental Disabilities Assistance and Bill of Rights Act
  - For a resident who is mentally ill, the mailing address and telephone number of the agency responsible for the protection and advocacy, established under the Protection and Advocacy for Mentally Ill Individuals Act

**EP Attributes**

New	FSA	CMS	MOS	CR	DOC	SC	ESP
		§483.12(a)(6)(i) §483.12(a)(6)(ii) §483.12(a)(6)(iii) §483.12(a)(6)(iv) §483.12(a)(6)(v) §483.12(a)(6)(vi) §483.12(a)(6)(vii) §482.58(b)(2)	M		D	C	ESP-1

- 10 For hospitals that use Joint Commission accreditation for deemed status purposes: The hospital conducts reassessments of its discharge planning process within its established time frames for reassessment.

**EP Attributes**

New	FSA	CMS	MOS	CR	DOC	SC	ESP
		§482.43(e)				A	

- 11 For hospitals that use Joint Commission accreditation for deemed status purposes: The reassessment of the discharge planning process includes a review of discharge plans to determine if the discharge plans meet the needs of patients.

**EP Attributes**

New	FSA	CMS	MOS	CR	DOC	SC	ESP
		§482.43(e)				A	

**Program: Hospital**

**Chapter: Provision of Care, Treatment, and Services**

**PC.04.01.05: Before the hospital discharges or transfers a patient, it informs and educates the patient about his or her follow-up care, treatment, and services.**

**Rationale:** Not applicable.

**Introduction:** Not applicable

**Elements of Performance**

- 1 When the hospital determines the patient's discharge or transfer needs, it promptly shares this information with the patient, and also with the patient's family when it is involved in decision making or ongoing care.

**EP Attributes**

New	FSA	CMS	MOS	CR	DOC	SC	ESP
		§482.62(a)(2) §482.62(a)(4) §482.43(b)(4) §482.43(c)(5) §483.12(a)(7) §482.58(b)(2)	M			C	

- 2 Before the patient is discharged, the hospital informs the patient, and also the patient's family when it is involved in decision making or ongoing care, of the kinds of continuing care, treatment, and services the patient will need.

**EP Attributes**

New	FSA	CMS	MOS	CR	DOC	SC	ESP
	- Risk	§482.43(c)(5) §483.12(a)(7) §482.58(b)(2)	M			C	

- 3 Before the patient is discharged or transferred, the hospital provides the patient with information about why he or she is being discharged or transferred.

**EP Attributes**

New	FSA	CMS	MOS	CR	DOC	SC	ESP
		§483.12(a)(7) §482.58(b)(2)	M			C	

- 5 Before the patient is transferred, the hospital provides the patient with information about any alternatives to the transfer.

**EP Attributes**

New	FSA	CMS	MOS	CR	DOC	SC	ESP
		§483.12(a)(7) §482.58(b)(2)	M			C	

- 7 The hospital educates the patient, and also the patient's family when it is involved in decision making or ongoing care, about how to obtain any continuing care, treatment, and services that the patient will need.

**EP Attributes**

New	FSA	CMS	MOS	CR	DOC	SC	ESP
		§482.43(b)(4) §482.43(c)(5)	M			C	

- 8 The hospital provides written discharge instructions in a manner that the patient and/or the patient's family or caregiver can understand. (See also RI.01.01.03, EP 1)

**EP Attributes**

New	FSA	CMS	MOS	CR	DOC	SC	ESP
			M	⚠		C	



**Program: Hospital**

**Chapter: Provision of Care, Treatment, and Services**

**PC.04.01.07: For hospitals that use Joint Commission accreditation for deemed status purposes and have swing beds: Residents are not transferred or discharged from the hospital unless they meet specific criteria, in accordance with law and regulation.**

**Rationale:** Not applicable.

**Introduction:** Not applicable

**Elements of Performance**

- 1 For hospitals that use Joint Commission accreditation for deemed status purposes and have swing beds: The hospital transfers or discharges residents only when at least one of the following conditions is met:
  - The resident's health has improved to the point where he or she no longer needs the hospital's services.
  - The transfer or discharge is necessary for the resident's benefit or if the hospital cannot meet the resident's needs.
  - The health or safety of the resident is endangered by remaining in the hospital.
  - The health or safety of individuals in the facility is endangered.
  - The hospital has provided the resident, who has not paid for his or her stay, with reasonable notice of transfer or discharge, as defined by the hospital and in accordance with law and regulation.
  - The hospital ceases operation.
  - The resident leaves against medical advice and signs a form stating that his or her action runs contrary to medical advice.

**EP Attributes**

New	FSA	CMS	MOS	CR	DOC	SC	ESP
		§483.12(a)(2)(i)	M			C	ESP-1
		§483.12(a)(2)(ii)					
		§483.12(a)(2)(iii)					
		§483.12(a)(2)(iv)					
		§483.12(a)(2)(v)					
		§483.12(a)(2)(vi)					
		§483.12(a)(5)(ii)(A)					
		§483.12(a)(5)(ii)(B)					
		§483.12(a)(5)(ii)(C)					
		§483.12(a)(5)(ii)(D)					
		§482.58(b)(2)					

**Program: Hospital**

**Chapter: Provision of Care, Treatment, and Services**

**PC.04.02.01: When a patient is discharged or transferred, the hospital gives information about the care, treatment, and services provided to the patient to other service providers who will provide the patient with care, treatment, or services.**

**Rationale:** Not applicable.

**Introduction:** Not applicable

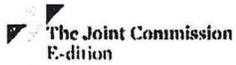
**Elements of Performance**

- 1 At the time of the patient's discharge or transfer, the hospital informs other service providers who will provide care, treatment, or services to the patient about the following:
  - The reason for the patient's discharge or transfer
  - The patient's physical and psychosocial status
  - A summary of care, treatment, and services it provided to the patient
  - The patient's progress toward goals
  - A list of community resources or referrals made or provided to the patient
 (See also PC.02.02.01, EP 1)

**EP Attributes**

New	FSA	CMS	MOS	CR	DOC	SC	ESP
		§482.43(d)	M			C	

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Effective Date: January 1, 2016

**Program: Hospital**

**Chapter: Provision of Care, Treatment, and Services**

**PC.02.02.11: The hospital provides access to the outdoors to patients with long lengths of stay.**

**Rationale:** Not applicable.

**Introduction:** Not applicable

**Elements of Performance**

- 1 The hospital arranges for patients who experience long lengths of stay to spend time outdoors, according to their plan of care, treatment, and services.

Note: The hospital can use its own grounds for this purpose or it can use community resources, such as parks.

**EP Attributes**

New	FSA	CMS	MOS	CR	DOC	SC	ESP
			M			C	

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✓ **The Joint Commission January 1, 2016 Requirements**

🏥 Hospital

🏥 Provision of Care, Treatment, and Services

🏥 PC.04.02.01

✓ 1.

**At the time of the patient's discharge or transfer, the hospital informs other service providers who will provide care, treatment, or services to the patient about the following:- The reason for the patient's discharge or transfer- The patient's physical and psychosocial status- A summary of care, treatment, and services it provided to the patient- The patient's progress toward goals- A list of community resources or referrals made or provided to the patient (See also PC.02.02.01, EP 1)**

✓ **CMS Medicare Requirements**

🏥 Hospital

🏥 §482.43

§482.43 Condition of Participation:  
Discharge Planning

The hospital must have in effect a discharge planning process that applies to all patients. The hospital's policies and procedures must be specified in writing.

✓ §482.43(d)

**TAG: A-0837**

**§482.43(d) Standard: Transfer or Referral**

**The hospital must transfer or refer patients, along with necessary medical information, to appropriate facilities, agencies, or outpatient services, as needed, for follow-up or ancillary care.**

## ✓ The Joint Commission January 1, 2016 Requirements

### Hospital

#### Provision of Care, Treatment, and Services

##### PC.04.01.07

###### ✓ 1.

**For hospitals that use Joint Commission accreditation for deemed status purposes and have swing beds: The hospital transfers or discharges residents only when at least one of the following conditions is met: - The resident's health has improved to the point where he or she no longer needs the hospital's services. - The transfer or discharge is necessary for the resident's benefit or if the hospital cannot meet the resident's needs. - The health or safety of the resident is endangered by remaining in the hospital. - The health or safety of individuals in the facility is endangered.- The hospital has provided the resident, who has not paid for his or her stay, with reasonable notice of transfer or discharge, as defined by the hospital and in accordance with law and regulation. - The hospital ceases operation. - The resident leaves against medical advice and signs a form stating that his or her action runs contrary to medical advice.**

## ✓ CMS Medicare Requirements

### Hospital

#### §482.58

§482.58 Special requirements for hospital providers of long-term care services ("swing-beds").

A hospital that has a Medicare provider agreement must meet the following requirements in order to be granted an approval from CMS to provide post-hospital extended care services, as specified in §409.30 of this chapter, and be reimbursed as a swing-bed hospital, as specified in §413.114 of this chapter:

#### §482.58(b)

(b) Skilled nursing facility services. The facility is substantially in compliance with the following skilled nursing facility requirements contained in subpart B of part 483 of this chapter.

#### ✓ §482.58(b)(2)

##### **TAG: A-1505**

**(2) Admission, transfer, and discharge rights (§483.12 (a) (1), (a)(2), (a)(3), (a)(4), (a) (5), (a)(6), and (a)(7)).**

#### §483.12

§483.12 Admission, transfer and discharge rights.

#### §483.12(a)

(a) Transfer and discharge—

#### §483.12(a)(2)

(2) Transfer and discharge requirements. The facility must permit each resident to remain in the facility, and not transfer or discharge the resident from the facility unless—

#### ✓ §483.12(a)(2)(i)

##### **TAG: A-----**

**(i) The transfer or discharge**

**is necessary for the resident's welfare and the resident's needs cannot be met in the facility;**

✓ §483.12(a)(2)(ii)

**TAG: A-----**

**(ii) 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;**

✓ §483.12(a)(2)(iii)

**TAG: A-----**

**(iii) The safety of individuals in the facility is endangered;**

✓ §483.12(a)(2)(iv)

**TAG: A-----**

**(iv) The health of individuals in the facility would otherwise be endangered;**

✓ §483.12(a)(2)(v)

**TAG: A-----**

**(v) 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. 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**

✓ §483.12(a)(2)(vi)

**TAG: A-----**

**(vi) The facility ceases to operate.**

 §483.12(a)(5)

(5) Timing of the notice.

 §483.12(a)(5)(ii)

(ii) Notice may be made as soon as practicable before transfer or discharge when—

✓ §483.12(a)(5)(ii)(A)

**TAG: A-----**

**(A) the safety of individuals in the facility would be endangered under paragraph (a)(2)(iii) of this section;**

✓ §483.12(a)(5)(ii)(B)

**TAG: A-----**

**(B) The health of individuals in the facility would be endangered, under paragraph (a)(2)(iv) of this section;**

✓ §483.12(a)(5)(ii)(C)

**TAG: A-----**

**(C) The resident's health improves sufficiently to allow a more immediate transfer or discharge, under paragraph (a)(2)(ii) of this section;**

✓ §483.12(a)(5)(ii)(D)

**TAG: A-----**

**(D) An immediate transfer or discharge is required by the resident's urgent medical needs, under paragraph (a)(2)(i) of this section; or**

## ✓ The Joint Commission January 1, 2016 Requirements

### Hospital

#### Provision of Care, Treatment, and Services

##### PC.04.01.05

###### ✓ 1.

**When the hospital determines the patient's discharge or transfer needs, it promptly shares this information with the patient, and also with the patient's family when it is involved in decision making or ongoing care.**

## ✓ CMS Medicare Requirements

### Hospital

#### §482.43

§482.43 Condition of Participation:  
Discharge Planning

The hospital must have in effect a discharge planning process that applies to all patients. The hospital's policies and procedures must be specified in writing.

#### §482.43(b)

§482.43(b) Standard: Discharge  
Planning Evaluation

#### ✓ §482.43(b)(4)

**TAG: A-0806**

**(4) The discharge planning evaluation must include an evaluation of the likelihood of a patient's capacity for self-care or of the possibility of the patient being cared for in the environment from which he or she entered the hospital.**

#### §482.43(c)

§482.43(c) Standard: Discharge Plan

#### ✓ §482.43(c)(5)

**TAG: A-0820**

**(5) As needed, the patient and family members or interested persons must be counseled to prepare them for post-hospital care.**

#### §482.58

§482.58 Special requirements for hospital providers of long-term care services ("swing-beds").

A hospital that has a Medicare provider agreement must meet the following requirements in order to be granted an approval from CMS to provide post-hospital extended care services, as specified in §409.30 of this chapter, and be reimbursed as a swing-bed hospital,

as specified in §413.114 of this chapter:

 §482.58(b)

(b) Skilled nursing facility services. The facility is substantially in compliance with the following skilled nursing facility requirements contained in subpart B of part 483 of this chapter.

 **§482.58(b)(2)**

**TAG: A-1505**

**(2) Admission, transfer, and discharge rights (§483.12 (a)(1), (a)(2), (a)(3), (a)(4), (a)(5), (a)(6), and (a)(7)).**

 §483.12

§483.12 Admission, transfer and discharge rights.

 §483.12(a)

(a) Transfer and discharge—

 **§483.12(a)(7)**

**TAG: A-----**

**(7) Orientation for transfer or discharge. A facility must provide sufficient preparation and orientation to residents to ensure safe and orderly transfer or discharge from the facility.**

 **CMS Medicare Requirements**

 **Psychiatric Hospital**

 §482.62

§482.62 Condition of Participation: Special staff requirements for psychiatric hospitals.

The hospital must have adequate numbers of qualified professional and supportive staff to evaluate patients, formulate written, individualized comprehensive treatment plans, provide active treatment measures, and engage in discharge planning.

 §482.62(a)

§482.62(a) Standard: Personnel.

The hospital must employ or undertake to provide adequate numbers of qualified professional, technical, and consultative personnel to:

✓ **§482.62(a)(2)**

**TAG: B138**

**(2) Formulate written individualized, comprehensive treatment plans;**

✓ **§482.62(a)(4)**

**TAG: B140**

**(4) Engage in discharge planning.**

## ✓ The Joint Commission January 1, 2016 Requirements

### Hospital

#### Provision of Care, Treatment, and Services

##### PC.04.01.05

✓ 2.

**Before the patient is discharged, the hospital informs the patient, and also the patient's family when it is involved in decision making or ongoing care, of the kinds of continuing care, treatment, and services the patient will need.**

## ✓ CMS Medicare Requirements

### Hospital

#### §482.43

§482.43 Condition of Participation:  
Discharge Planning

The hospital must have in effect a discharge planning process that applies to all patients. The hospital's policies and procedures must be specified in writing.

#### §482.43(c)

§482.43(c) Standard: Discharge Plan

#### ✓ §482.43(c)(5)

**TAG: A-0820**

**(5) As needed, the patient and family members or interested persons must be counseled to prepare them for post-hospital care.**

#### §483.12

§483.12 Admission, transfer and discharge rights.

#### §483.12(a)

(a) Transfer and discharge—

#### ✓ §483.12(a)(7)

**TAG: A-----**

**(7) Orientation for transfer or discharge. A facility must provide sufficient preparation and orientation to residents to ensure safe and orderly transfer or discharge from the facility.**

#### §482.58

§482.58 Special requirements for hospital providers of long-term care services ("swing-beds").

A hospital that has a Medicare provider agreement must meet the following requirements in order to be granted an approval from CMS to provide post-hospital extended care services, as specified in §409.30 of this chapter, and

be reimbursed as a swing-bed hospital, as specified in §413.114 of this chapter:

 §482.58(b)

(b) Skilled nursing facility services. The facility is substantially in compliance with the following skilled nursing facility requirements contained in subpart B of part 483 of this chapter.

 **§482.58(b)(2)**

**TAG: A-1505**

**(2) Admission, transfer, and discharge rights (§483.12 (a)(1), (a)(2), (a)(3), (a)(4), (a)(5), (a)(6), and (a)(7)).**

## ✓ The Joint Commission January 1, 2016 Requirements

### Hospital

#### Provision of Care, Treatment, and Services

##### PC.04.01.05

✓ 3.

**Before the patient is discharged or transferred, the hospital provides the patient with information about why he or she is being discharged or transferred.**

## ✓ CMS Medicare Requirements

### Hospital

#### §482.58

§482.58 Special requirements for hospital providers of long-term care services (“swing-beds”).

A hospital that has a Medicare provider agreement must meet the following requirements in order to be granted an approval from CMS to provide post-hospital extended care services, as specified in §409.30 of this chapter, and be reimbursed as a swing-bed hospital, as specified in §413.114 of this chapter:

#### §482.58(b)

(b) Skilled nursing facility services. The facility is substantially in compliance with the following skilled nursing facility requirements contained in subpart B of part 483 of this chapter.

#### ✓ §482.58(b)(2)

**TAG: A-1505**

**(2) Admission, transfer, and discharge rights (§483.12 (a)(1), (a)(2), (a)(3), (a)(4), (a)(5), (a)(6), and (a)(7)).**

#### §483.12

§483.12 Admission, transfer and discharge rights.

#### §483.12(a)

(a) Transfer and discharge—

#### ✓ §483.12(a)(7)

**TAG: A-----**

**(7) Orientation for transfer or discharge. A facility must provide sufficient preparation and orientation to residents to ensure safe and orderly transfer or discharge from the facility.**

✓ **The Joint Commission January 1, 2016 Requirements**

 Hospital

 Provision of Care, Treatment, and Services

 PC.04.01.03

✓ 1.

**The hospital begins the discharge planning process early in the patient's episode of care, treatment and services.**

✓ **CMS Medicare Requirements**

 Hospital

 §482.43

§482.43 Condition of Participation:  
Discharge Planning

The hospital must have in effect a discharge planning process that applies to all patients. The hospital's policies and procedures must be specified in writing.

✓ **§482.43(a)**

**TAG: A-0800**

**§482.43(a) Standard:**

**Identification of Patients in Need of Discharge Planning**

**The hospital must identify at an early stage of hospitalization all patients who are likely to suffer adverse health consequences upon discharge if there is no adequate discharge planning.**

 §482.43(b)

§482.43(b) Standard: Discharge  
Planning Evaluation

✓ **§482.43(b)(5)**

**TAG: A-0810**

**(5) The hospital personnel must complete the evaluation on a timely basis so that appropriate arrangements for post-hospital care are made before discharge, and to avoid unnecessary delays in discharge.**

✓ **§482.43(b)(6)**

**TAG: A-0811**

**(6) The hospital must discuss the results of the evaluation with the patient or individual acting on his or her behalf.**

 §482.43(c)

§482.43(c) Standard: Discharge Plan

✓ §482.43(c)(2)

**TAG: A-0819**

**(2) In the absence of a finding by the hospital that a patient needs a discharge plan, the patient's physician may request a discharge plan. In such a case, the hospital must develop a discharge plan for the patient.**

✓ §482.43(c)(3)

**TAG: A-0820**

**(3) The hospital must arrange for the initial implementation of the patient's discharge plan**

✓ **CMS Medicare Requirements**

 **Psychiatric Hospital**

✓ §482.62

**TAG: B136**

**§482.62 Condition of Participation: Special staff requirements for psychiatric hospitals.**

**The hospital must have adequate numbers of qualified professional and supportive staff to evaluate patients, formulate written, individualized comprehensive treatment plans, provide active treatment measures, and engage in discharge planning.**

 §482.62(a)

§482.62(a) Standard: Personnel.

The hospital must employ or undertake to provide adequate numbers of qualified professional, technical, and consultative personnel to:

✓ §482.62(a)(4)

**TAG: B140**

**(4) Engage in discharge planning.**

## ✓ The Joint Commission January 1, 2016 Requirements

### Hospital

#### Provision of Care, Treatment, and Services

##### PC.04.01.03

### ✓ 6.

**For hospitals that use Joint Commission accreditation for deemed status purposes and have swing beds: The written notice before transfer or discharge specified in the CoP from 42 CFR 483.12(a)(4) includes the following: - The reason for transfer or discharge - The effective date of transfer or discharge - The location to which the resident is transferred or discharged - A statement that the resident has the right to appeal the action to the state - The name, address, and telephone number of the state's long term care ombudsman - For a resident who is developmentally disabled, the mailing address and telephone number of the agency responsible for the protection and advocacy, established under Part C of the Developmental Disabilities Assistance and Bill of Rights Act - For a resident who is mentally ill, the mailing address and telephone number of the agency responsible for the protection and advocacy, established under the Protection and Advocacy for Mentally Ill Individuals Act**

## ✓ CMS Medicare Requirements

### Hospital

#### §483.12

§483.12 Admission, transfer and discharge rights.

#### §483.12(a)

(a) Transfer and discharge—

#### §483.12(a)(6)

(6) Contents of the notice. The written notice specified in paragraph (a)(4) of this section must include the following:

#### ✓ §483.12(a)(6)(i)

**TAG: A-----**

**(i) The reason for transfer or discharge;**

#### ✓ §483.12(a)(6)(ii)

**TAG: A-----**

**(ii) The effective date of transfer or discharge;**

#### ✓ §483.12(a)(6)(iii)

**TAG: A-----**

**(iii) The location to which the resident is transferred or discharged;**

#### ✓ §483.12(a)(6)(iv)

**TAG: A-----**

**(iv) A statement that the resident has the right to appeal the action to the State;**

#### ✓ §483.12(a)(6)(v)

**TAG: A-----**

**(v) The name, address and telephone number of the State long term care ombudsman;**

#### ✓ §483.12(a)(6)(vi)

**TAG: A-----**

**(vi) For nursing facility residents with developmental disabilities, the mailing address and telephone number of the agency responsible for the protection and advocacy of developmentally disabled individuals established under Part C of the Developmental Disabilities Assistance and Bill of Rights Act; and**

✔ §483.12(a)(6)(vii)

**TAG: A-----**

**(vii) For nursing facility residents who are mentally ill, the mailing address and telephone number of the agency responsible for the protection and advocacy of mentally ill individuals established under the Protection and Advocacy for Mentally Ill Individuals Act.**

 §482.58

§482.58 Special requirements for hospital providers of long-term care services (“swing-beds”).

A hospital that has a Medicare provider agreement must meet the following requirements in order to be granted an approval from CMS to provide post-hospital extended care services, as specified in §409.30 of this chapter, and be reimbursed as a swing-bed hospital, as specified in §413.114 of this chapter:

 §482.58(b)

(b) Skilled nursing facility services. The facility is substantially in compliance with the following skilled nursing facility requirements contained in subpart B of part 483 of this chapter.

✔ §482.58(b)(2)

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**(2) Admission, transfer, and discharge rights (§483.12 (a)**

**(1), (a)(2), (a)(3), (a)(4), (a)(5), (a)(6), and (a)(7)).**