

Sec. 17b-342-4. Nursing facility and hospital requirements

(a) Nursing Facility Admission Requirements

Nursing Facilities shall comply with the following Connecticut Home Care Program requirements:

(1) Information and Forms Distributions

When a nursing facility identifies an elderly applicant for admission to the facility, the nursing facility shall inform the person about the program by providing a copy of the Home Care Request Form and program information.

(A) Medicaid Recipients and Applicants

Prior to admission to a nursing facility, recipients and individuals who have applied for Medicaid who are aged 65 years or older shall:

(i) Complete and submit to the department a Home Care Request form to confirm that they are Medicaid recipients or applicants;

(ii) be screened by the department through its health screen form to determine the need for nursing home care and the feasibility of home care pursuant to section 17b-342-1(b)(15) of the Regulations of Connecticut State Agencies; and

(iii) receive department authorization for admission and Medicaid payment for nursing facility care or home care. The effective date for Medicaid reimbursement on behalf of such person shall be no earlier than the date admission is authorized by the department.

(B) Other Requirements

(i) At the time of the admission of all other elderly persons, the nursing facility shall obtain a statement signed by the person verifying that he or she received the Connecticut Home Care Program materials and understands his or her rights and responsibilities under the Connecticut Home Care Program. The statement shall be maintained in the individual's file. If the person indicates that the program materials were not received or requests Connecticut Home Care Program materials, the facility shall provide the person with a set of materials. The nursing facility shall complete a compliance form for this purpose.

(2) Emergency Admissions for Medicaid Recipients and Applicants

(A) In the case of emergency admissions as defined in section 17b-342-1(b)(15) of the Regulations of Connecticut State Agencies, elderly persons may be admitted to a nursing facility prior to completion of the health screen form. However, the facility shall notify the department within one (1) working day of the admission. Such an emergency shall be documented in writing on the department emergency admission documentation form prior to admission by a health care professional in the facility. The health care professional's name, business address and phone number shall be noted in the patient's record. A copy of the emergency admission form that specifies compliance with these regulations shall be provided to the department and maintained in the individual's records.

(3) Exemptions

The following are elderly persons who are exempt from the Connecticut Home Care Program screening process although they may request to be screened for participation in the program:

(A) Patients transferring from one nursing facility to another and intra-facility transfers;

(B) nursing facility patients who are admitted to a hospital and discharged back to a nursing facility;

(C) individuals who are out-of-state residents at the time they are seeking admission to a nursing facility;

(D) individuals seeking short term respite care in a nursing facility as defined in section 17b-342-2(n) of the Regulations of Connecticut State Agencies; and

(E) terminally ill individuals seeking nursing facility admission. For purposes of this subsection “terminally ill” means that a physician has signed a statement in a form specified by the department for this purpose only, identifying the patient’s medical diagnosis and verifying that the individual’s life expectancy is six (6) months or less. A copy of the physician’s statement shall be submitted to the department and also be filed in the patient’s nursing facility record.

(4) Coordination with screening process for Mental Illness and Mental Retardation under OBRA 1987.

(A) The preadmission screening procedures administered under the Connecticut Home Care Program shall be coordinated with the federally mandated screening for nursing home applicants with mental illness or mental retardation. Exemptions C, D and E above do not apply to the mandatory nursing home preadmission screening for mental illness and mental retardation related to the federal Omnibus Budget Reconciliation Act of 1987 (OBRA).

(B) Except when exemptions apply or the emergency admission procedures have been followed, the department shall not reimburse a nursing facility for any days that an elderly person spends in the facility prior to completion of the preadmission screening process for the Connecticut Home Care Program and the federally mandated screening for nursing home applicants with mental illness or mental retardation.

(b) Hospital Responsibilities

Hospitals shall comply with the following Connecticut Home Care Program requirements:

(1) Information and Forms Distribution

(A) If it can be determined by the hospital within three (3) days of admission that an elderly person, as defined in section 17b-342-1(b)(14) of the Regulations of Connecticut State Agencies, would be expected, based upon the professional judgement of hospital personnel, to be an applicant for admission to a nursing facility without the services available through the Connecticut Home Care Program, the hospital shall distribute the Connecticut Home Care Program forms packet to such elderly person and provide information about the program. Hospital staff are encouraged to provide program information to all elders or their representatives.

(B) If the patient’s condition is too unstable to make the above determination by day three, the Connecticut Home Care Program forms and information shall be provided when the determination can be made. The hospital staff shall document in the patient’s record the reason for the postponement (e.g. “patient’s condition too unstable to make determination”). The hospital staff shall also document the date the materials are distributed.

(2) Completion and Submission of Forms

Personnel responsible for discharge planning shall complete and submit to the department any required forms for determining nursing facility level of care eligibility.

(Effective July 8, 1998; Amended September 3, 2010)