

Medicaid Bed Hold Changes

As enacted in Chapter 109 of the Laws of 2010 and communicated by NYS DOH in a memo dated July 19, 2010, the following changes are in effect for Medicaid bed reservations payments for residents 21 years of age or older:

- (a) The bed hold per diem rate will be reduced from 100% to 95% of the nursing home rate retroactive to April 1, 2010
- (b) Bed hold payment for temporary hospitalizations is limited to 14 days in any 12 month period as of July 19, 2010.
- (c) Therapeutic leave payment is limited to 10 days in any 12 month period as of July 19, 2010.

CHARTS clients—in NY State only—should do the following:

(1) Set the Bed Hold Rate to 95% of the Room and Board rate.

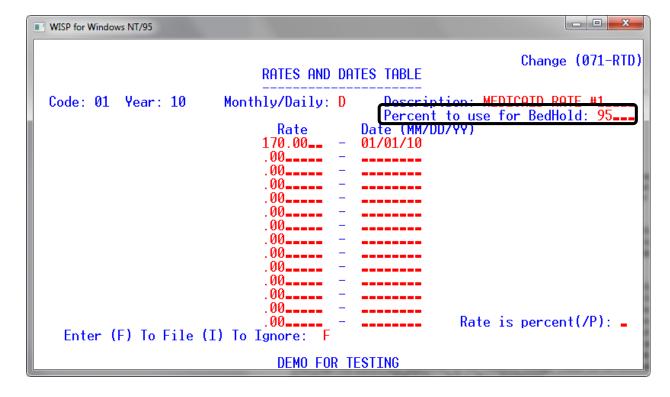
In the Change Table File program [CTF, 8, 12], for all Medicaid rates (there are usually four found in CTF, 1, 21, Part D Bill Codes), do the following:

Change each rate to 95 percent in the field 'Percent to use for Bedhold'.

The field 'Rate is percent' should be left blank. All other fields should be left as previously set.

Please note that the 'Year' in the Table File key should be '10'. If a key for 2010 is not on file use '09'.

This change can be done immediately, since the 95% of the Room and Board payment is effective retroactive to April 1, 2010.





(2) In the Change Table file program [CTF, 8, 3] – for all Medicaid Room and Board Bill Types do the following:

Change both 'No. Bedhold days allowed' fields to 14 days each.

All other fields should be left as previously set.

This change should be done upon completion of the July Posting of Medicaid charges.

[July billing is not affected because the 14 day limit begins July 19th and cannot be reached before July 31st.]

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_ D X
■ WISP for Windows NT/95
                                                                             Change (001-B
                                             Secondary Key: MNY_
Form Number : 081_ State: NY Facility: _
PUCE No.: 81 Age #: 1 Census #: 1
                                     BILLING CODES TABLE
 Enter Main Key: 11
 Description : MEDICAID NEW YORK____
                                             Limit Days ( C): Prorate using days Print Contr Allow Column (Y/N):
      Inherent Type: 1
   1-Medicaid 3- Private
2-Medicare 4- V.A. 5- Other
                                             Deduct Budget for Non Ma Type(B):
                                             MopII No: __ Coins.Prov: __ Days: __
 CoPay Bill Number: __ Code: __
                                             Rate Codes Elig: ____ NonElig: ____
                                                                             Use mds rate: -
                                             Options:
 Rate Codes
 Second Rate Codes:
                                              1: Disch.no Bedhold 2: Deceased in Home
3: Bed Hold Release 4: Bill Therp. as BH
 Contractual Codes:
                                                                           Deceased in Hosp.
                                                             RHCF Level/ /
                                                                   Provider Id:
 No. Bedhold days allowed: 14-14-
                                                             Bill Type / Group: ___
  W Reimburse, Bill/Rate Code
                                                             InterfaceCode/MangeCare
    Enter (F) To File (I) To Ignore: F
                                                     Ins. /Specialty Code
                                      DEMO FOR TESTING
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Additional programming changes – including tracking hospital bed hold and therapeutic leave days – will be available in future updates.

Please call our client services staff at (718) 338-2400 if you have any questions or require additional information.