

Division of Public and Behavioral Health

Technical Bulletin



Topic: Discharge Planning Requirements for Hospitals

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To: Nevada Licensed Hospitals

The purpose of this technical bulletin is to remind and inform hospitals and their discharge planners about state and federal requirements for proper patient discharge planning and the consequences to patient health and safety when a facility fails to comply with these requirements.

Federal and State Laws and Regulations

Both state and federal regulations address the issue of discharge planning by hospitals. 42 CFR §482.43 states that hospitals "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." Nevada Administrative Code (NAC) 449.332 also outlines the requirements for hospital discharge planning, and states in part:

- A hospital shall have a process for discharge planning that applies to all inpatients and develop and implement policies and procedures for the discharge planning process.
- The evaluation of the needs of a patient relating to discharge planning and the discharge plan for the patient, if any, must be documented in his or her medical record.
- The patient, members of the patient's family, and any other person involved in caring for the patient must be provided with such information as is necessary to prepare them for the post-hospital care of the patient. "Any other person" includes state or other program staff responsible for the individual's well-being and services, such as service coordinators or case managers, both staffed by the hospital and those identified as external providers by the patient. This is especially important for patients with chronic diseases, intellectual or other disabilities, and psychiatric conditions.
- If, during a patient's hospitalization, factors arise that may affect the needs of the patient relating to his or her continuing care or current discharge plan, the needs of the patient must be reassessed and the plan, if any, must be adjusted accordingly.
- If identified in a discharge plan, referral of a patient to outpatient services or transfer of the patient to another facility must be accomplished in a manner that meets the identified needs of the patient, including the sharing of necessary medical information about the patient with the receiving service or facility.

<u>Nevada Revised Statutes (NRS) 449A.100</u> indicates in part: "Every medical facility and facility for the dependent must provide the services necessary to treat properly a patient in a particular case or must be able to arrange the transfer of the patient to another facility which can provide that care." This part of the law requires transfer to both lower level facilities as well as facilities for higher levels of care.

Caution Regarding Referral Agencies

Hospitals are responsible for adequate discharge planning, and this responsibility cannot be delegated to an entity outside the control of the hospital (a non-hospital agent). There are individuals and businesses that claim to be "referral agencies" or that assist hospitals to place patients in need of assistance to find a residence or facility upon discharge. Depending on the services offered by these entities and depending on the patient's needs and other circumstances, a hospital's use of these entities could be illegal or at least unsafe for the patient. Hospitals are advised to use caution when engaging these entities, and only to use licensed businesses that provide referrals to residential facilities for groups when selecting this destination for patient transfer. Ultimately, hospitals are held responsible for adequate discharge planning whether an outside agency is used or not.

Patient Safety

Failure to comply with discharge planning requirements can put the patient at risk of not receiving sufficient post-hospital care and, in worst case events, this could result in deaths occurring soon after discharge.

A patient's ongoing physical and mental health needs must be considered when evaluating each patient and when creating discharge plans. If a patient needs post-hospital care or supervision, there are licensed or certified facility types in Nevada with a range of levels of care to which hospitals can transfer patients according to the patient's needs at the time of discharge.

In particular, patients with psychiatric conditions should be evaluated carefully to determine whether post-hospital supervision is necessary. If a patient doesn't require supervision but requires assistance with medication management or other individualized services, then a facility certified to provide community-based living arrangement (CBLA) services may be an appropriate setting for transfer. When it is determined that supervision is necessary, patients should be transferred to a licensed facility required to provide supervision. Examples of licensed facility types include:

Psychiatric hospitals

Chief Medical Officer

All Hotelson

Residential facilities for groups (assisted living facilities) with a mental illness endorsement

Current lists of all licensed Nevada health facilities (including CBLAs, psychiatric hospitals and residential facilities for groups) can be found online at findahealthfacility.nv.gov.

Signed:	Date:	08/30/2018
Julie Kotchevar, PhD Administrator		
Signed:	Date: _	08/30/2018
Ihsan Azzam, PhD, MD		