**REQUIRED POLICIES FOR MONTANA CRITICAL ACCESS HOSPITALS**

**SWING-BED SPECIAL REQUIREMENTS**

A CAH’s governing body or legally responsible individual is responsible for monitoring and administering the policies to ensure that quality health care is provided in a safe environment.[[1]](#footnote-1) This document is part of a series of documents created for the Montana Hospital Association specific to Critical Access Hospitals (“CAHs”) and their affiliated facilities. Other documents in this series are:

* ***Required Policies for Montana Critical Access Hospitals***
* ***Required Policies for Montana Critical Access Hospitals: Rural Health Center Special Requirements***

This document sets forth a list of policies specific to swing-bed special requirements that Montana Critical Access Hospitals (“CAHs”) are required to maintain under: (1) the federal conditions of participation (“CoPs”) for CAHs set forth by the Center for Medicare and Medicaid Services (“CMS”); (2) the federal CoPs for Skilled Nursing Facilities and applicable to Swing-Bed services when furnished by a CAH; and (3) Montana state licensure requirements specific to CAHs.

This document sets forth the following information for each policy: (1) Policy Name; (2) Description of the Policy; and (3) the related legal citation. As applicable, the description of the policy may include comments on review requirements, such as the timing of policy reviews and which professional must be involved in the development or review of certain policies. Where not otherwise specified, biennial review (every two years) by applicable stakeholders is recommended.

Note that this list only sets forth the policies specifically required for Swing-Bed services furnished by the CAH. Other policies not listed here may be required, encouraged, or desirable such as those relating to patient confidentiality, information security, fraud and abuse practices, or general compliance. Additionally, please note that Montana state licensure requirements for CAHs require compliance with the federal CoPs ***effective as of 2005***, [[2]](#footnote-2) which differ slightly from the most current CoPs effective as of 2019. When the current, cited regulation differs from the 2005 regulation, these differences are described in accompanying footnotes. There are minimal substantive differences between the current CoPs and the 2005 CoPs.

**REQUIRED POLICIES**

| **Policy** | **Description** | **Citation** |
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| Resident Abuse, Neglect, Exploitation and Misappropriation of Resident Property Prevention Policy | CAHs must development and implement written policies and procedures to prevent abuse, neglect, and exploitation of residents and misappropriation of resident property that includes the following components[[3]](#footnote-3):1. Screening potential employees for a history of such conduct;
2. Training for new and existing employees on prohibiting, preventing, identifying, and reporting such conduct;
3. Prevention of such conduct;
4. Identification of such conduct;
5. Investigation of such conduct;
6. The protection of residents during and after an investigation; and
7. Reporting / responding to such conduct
 | 42 C.F.R. § 485.645(d)(3) (2019)42 C.F.R.§ 483.12(b)(1), (2) (2016)State Operations Manual (“SOM”), Appendix PP, at 135-141 (2020). |
| Loss or Damage of Resident’s Dentures Policy | The facility must have a policy identifying those circumstances when the loss or damage of dentures is the facility's responsibility and may not charge a resident for the loss or damage of dentures determined in accordance with facility policy to be the facility's responsibility.Of note, a blanket policy of facility non-responsibility for the loss or damage of dentures or a policy stating the facility is only responsible when the dentures are in actual physical possession of facility staff would not meet the requirement. In addition, the facility is prohibited from requesting or requiring residents or potential residents to waive any potential facility liability for losses of personal property.  | 42 C.F.R. § 483.55(a)(3) (2016)42 C.F.R. § 483.15(a)(2)(iii) (2017) |

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1. 42 C.F.R. § 485.627 (2019) [↑](#footnote-ref-1)
2. Mont. Admin. R. 37.106.704(1) (2020) [↑](#footnote-ref-2)
3. Note that the CMS State Operations Manual, Appendix PP provides detailed guidance on each component that must be included in a facility’s policies and procedures. SOM, Appendix PP at 135-141, (2020), available at https://www.cms.gov/Regulations-and-Guidance/Guidance/Manuals/downloads/som107ap\_pp\_guidelines\_ltcf.pdf. [↑](#footnote-ref-3)