

COVID-19

## Guidance on Patients Being Discharged to Skilled Nursing or Long-Term Care Facilities (SNF/LTC)

*Please refer to StarPort COVID Page (or <https://medstarhealth.org/covid19resources> off network) for the complete and most current guidance as this information is rapidly changing and updated*

**References: Centers for Disease Control, Centers for Medicare and Medicaid Services, Maryland & Washington Departments of Health** <https://www.cdc.gov/coronavirus/2019-ncov/hcp/disposition-hospitalized-patients.html>

For patients without a diagnosis of COVID-19 during the hospital stay, a negative test should be obtained within 5 days of discharge, with negative symptom screen within 3 days of discharge.

For patients with a diagnosis of COVID-19 during the hospital stay and still under Transmission-Based Precautions, a SNF/LTC can accept a resident if the facility can follow CDC guidance for Transmission-Based Precautions. If a SNF/LTC cannot follow this guidance, it must wait to accept the patient according to these criteria:

### 1) Time-based strategy

- At least 3 days (72 hours) have passed *since* recovery defined as resolution of fever without the use of fever-reducing medications **AND** improvement in respiratory symptoms (e.g. cough, shortness of breath); **AND**,
- At least 10 days have passed *since symptoms first appeared, or for those patients who are asymptomatic, from the time of the first positive test.*

### 2) Test-based strategy

- Resolution of fever without the use of fever-reducing medications **AND**
- Improvement in respiratory symptoms (e.g. cough, shortness of breath) **AND**
- Two negative results of an FDA approved COVID-19 assay collected  $\geq 24$  hours apart for the following patient population:
  - a) Hospitalized
  - b) Severely immunocompromised
  - c) Being transferred to a long-term care or assisted living facility

### Recommendation for MedStar Case Management Departments

- 1) Escalate to Physician Advisor for cases with problematic facilities not following the CDC guidelines
- 2) Physician Advisor to alert the Ambassador if no resolution with possibility of the Ambassador reporting to the DOH for intervention
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- 3) For those patients who could receive proper treatment in a SNF, but no bed is available in a participating SNF, a physician may certify or recertify the need for continued hospitalization and Medicare will pay the DRG rate and any cost outliers for the entire stay until the Medicare patient can be moved to an appropriate facility.