DEPARTMENT OF HEALTH & HUMAN SERVICES Centers for Medicare & Medicaid Services 7500 Security Boulevard, Mail Stop C2-21-16 Baltimore, Maryland 21244-1850



Center for Clinical Standards and Quality/Quality, Safety & Oversight Group

Ref: QSO-20-25-NH EXPIRED EFFECTIVE: May 1, 2023

DATE: August 4, 2025

ORIGINAL April 13, 2020

POSTING DATE:

TO: State Survey Agency Directors

FROM: Director

Quality, Safety & Oversight Group

SUBJECT: EXPIRED: 2019 Novel Coronavirus (COVID-19) Long-Term Care Facility Transfer

Scenarios

Memo Expiration Information:

Expiration Date: May 1, 2023

Expiration Information: Refer to QSO-25-23-ALL released July 30, 2025: Guidance for

the Expiration of the COVID-19 Public Health Emergency

(PHE)

Memorandum Summary

• CMS is providing supplemental information for transferring or discharging residents between facilities for the purpose of cohorting residents based on COVID-19 status (i.e., positive, negative, unknown/under observation).

Background

CMS has issued unprecedented flexibility to the long-term care (LTC) facilities (skilled nursing facilities (SNFs) and/or nursing facilities (NFs)) in order to protect residents during the COVID-19 pandemic. On April 2, 2020, CMS and CDC released the "COVID-19 Long-Term Care Facility Guidance," which alerted facilities to actions they should take to prevent transmission of COVID-19. These actions include separating residents based on COVID-19 status (i.e., positive, negative, unknown/under observation). This may mean facilities will need to transfer residents within the facility, to another long-term care facility, or to other noncertified locations designated by the State. In order to coordinate appropriate relocation of residents between facilities or another location, facilities should work with State and local community leaders to identify and designate facilities dedicated to residents diagnosed with COVID-19 and those with suspected COVID-19.

To facilitate cohorting of residents based on COVID-19 status, CMS issued <u>blanket waivers</u> for certain CMS requirements of participation for LTC facilities. These include a physical environment waiver to temporarily allow rooms not normally used as a resident's room in a certified LTC facility to be used to accommodate beds and resident care. These also include certain transfer and discharge requirements that are waived solely for the purposes of cohorting. Please view all these waivers, and their exceptions, through the blanket waivers link above.

LTC Facility Transfer Scenarios

In response to the recent questions related to cohorting, CMS is providing supplemental information for transferring or discharging residents between facilities. In general, if two or more certified LTC facilities want to transfer or discharge residents between themselves for the purposes of cohorting, they do not need any additional approval to do so. However, if a certified LTC facility would like to transfer or discharge residents to a non-certified location for the purposes of cohorting, they need approval from the State Agency. Please see the attachment, "LTC Facility Transfer Scenarios" for a depiction and explanation of these scenarios.

Contact: For questions or concerns regarding this memo, please contact DNH TriageTeam@cms.hhs.gov.

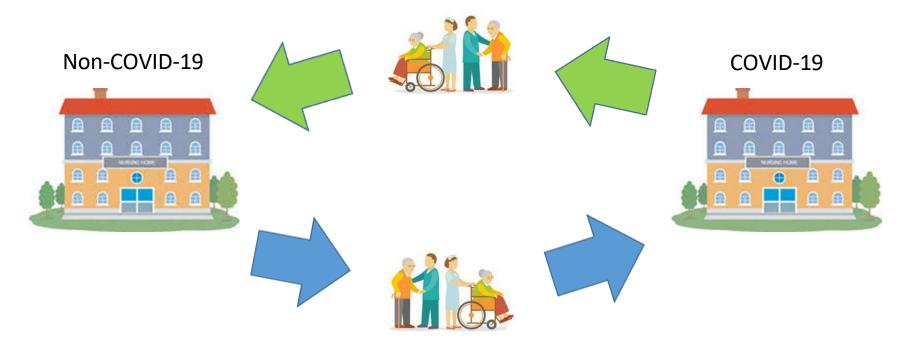
Effective Date: Immediately. This policy should be communicated with all survey and certification staff, their managers and the State/Branch training coordinators within 30 days of this memorandum.

/s/ David R. Wright

Attachment: LTC Facility Transfer Scenarios

cc: Survey & Operations Group (SOG) Management

Two or more <u>certified</u> long term care (LTC) facilities (SNFs and/or NFs) transfer patients between facilities to create a COVID-19 and non-COVID-19 facility. Allowed under Blanket Transfer Waiver without additional approval. Each certified facility bills Medicare for the residents in their facility.



CMS is waiving requirements in 42 CFR 483.10(c)(5); 483.15(c)(3), (c)(4)(ii), (c)(5)(i) and (iv), (c)(9), and (d); and § 483.21(a)(1)(i), (a)(2)(i), and (b) (2)(i) (with some exceptions) to allow a long term care (LTC) facility to transfer or discharge residents to another LTC facility solely for the following cohorting purposes:

- Transferring residents with symptoms of a respiratory infection or confirmed diagnosis of COVID-19 to another facility that agrees to accept each specific resident, and is dedicated to the care of such residents;
- Transferring residents without symptoms of a respiratory infection or confirmed to not have COVID-19 to another facility that agrees to accept each specific resident, and is dedicated to the care of such residents to prevent them from acquiring COVID-19; or
- Transferring residents without symptoms of a respiratory infection to another facility that agrees to accept each specific resident to observe for any signs or symptoms of a respiratory infection over 14 days.

Transfer residents from one or more certified LTC facilities to a non-certified location that is state approved and where residents must be cared for by LTC facility staff. Medicare reimbursement remains with the LTC facility caring for patients in the new location. This location could be utilized by multiple LTC facilities, providing care with their own staff.

State Approved non-LTC Location staffed and operated by Certified LTC facility



CMS is waiving requirements related at 42 CFR 483.90, specifically the following: Provided that the state has approved the location as one that sufficiently addresses safety and comfort for patients and staff, CMS is waiving requirements under § 483.90 to allow for a non-certified LTC building to be temporarily certified and available for use by a LTC facility in the event there are needs for isolation for COVID-19 positive residents, which may not be feasible in the existing LTC facility structure to ensure care and services during treatment for COVID-19 are available while protecting other vulnerable adults.

These requirements are also waived when transferring residents to another facility, such as a COVID-19 isolation and treatment location, with the provision of services "under arrangements," as long as it is not inconsistent with a state's emergency preparedness or pandemic plan, or as directed by the local or state health department. In these cases, the transferring LTC facility need not issue a formal discharge, as it is still considered the provider and should bill Medicare normally for each day of care. The transferring LTC facility is then responsible for reimbursing the other provider that accepted its resident(s) during the emergency period.

Transfer of COVID-19 residents to Federal/State run facility staffed with Federal or State personnel: Transfers by Order of Governmental Authority (e.g., FEMA) and no reimbursement to the LTC facility.



No waiver necessary as long as transfer is not inconsistent with a state's emergency preparedness or pandemic plan, or as directed by the local or state health department