

# Tool- Transfer and Discharge Policy and Procedure Checklist

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## Tool: Transfer and Discharge Policy and Procedure

### Multiple Sections of the Requirements of Participation Related to Transfer and Discharge

#### § 483.10 Resident rights.

**(14) Notification of changes.** A facility must immediately inform the resident; consult with the resident's physician; and notify, consistent with his or her authority, the resident representative(s), when there is a decision to transfer or discharge the resident from the facility as specified in § 483.15(c)(1)(ii).

#### § 483.15 Admission, transfer, and discharge rights.

**(b) Equal access to quality care.** (1) A facility must establish, maintain and implement identical policies and practices regarding transfer and discharge, as defined in § 483.5 and the provision of services for all individuals regardless of source of payment, consistent with § 483.10(a)(2);

#### **(c) Transfer and discharge—(1) Facility requirements—**

The facility must permit each resident to remain in the facility, and not transfer or discharge the resident from the facility unless—

- The transfer or discharge is necessary for the resident's welfare and the resident's needs cannot be met in the facility;
- The transfer or discharge is appropriate because the resident's health has improved sufficiently so the resident no longer needs the services provided by the facility;
- The safety of individuals in the facility is endangered due to the clinical or behavioral status of the resident;
- The health of individuals in the facility would otherwise be endangered;
- The resident has failed, after reasonable and appropriate notice, to pay for (or to have paid under Medicare or Medicaid) a stay at the facility. Nonpayment applies if the resident does not submit the necessary paperwork for third party payment or after the third party, including Medicare or Medicaid, denies the claim and the resident refuses to pay for his or her stay. For a resident who becomes eligible for Medicaid after admission to a facility, the facility may charge a resident only allowable charges under Medicaid; or
- The facility ceases to operate.

(ii) **The facility may not transfer or discharge** the resident while the appeal is pending, pursuant to § 431.230 of this chapter, when a resident exercises his or her right to appeal a transfer or discharge notice from the facility pursuant to § 431.220(a)(3) of this chapter, unless the failure to discharge or transfer would endanger the health or safety of the resident or other individuals in the facility. The facility must document the danger that failure to transfer or discharge would pose.



**(2) Documentation.** When the facility transfers or discharges a resident under any of the circumstances specified in paragraphs (c)(1)(i)(A) through (F) of this section, the facility must ensure that the transfer or discharge is documented in the resident's medical record and appropriate information is communicated to the receiving health care institution or provider.

- (i) Documentation in the resident's medical record must include:
  - (A) The basis for the transfer per paragraph (c)(1)(i) of this section.
  - (B) In the case of paragraph (c)(1)(i)(A) of this section, the specific resident need(s) that cannot be met, facility attempts to meet the resident needs, and the service available at the receiving facility to meet the need(s).
- (ii) The documentation required by paragraph (c)(2)(i) of this section must be made by—
  - (A) The resident's physician when transfer or discharge is necessary under paragraph (c)(1)(A) or (B) of this section; and
  - (B) A physician when transfer or discharge is necessary under paragraph (b)(1)(i)(C) or (D) of this section.
- (iii) Information provided to the receiving provider must include a minimum of the following:
  - (A) Contact information of the practitioner responsible for the care of the resident
  - (B) Resident representative information including contact information.
  - (C) Advance Directive information.
  - (D) All special instructions or precautions for ongoing care, as appropriate.
  - (E) Comprehensive care plan goals,
  - (F) All other necessary information, including a copy of the residents discharge summary, consistent with § 483.21(c)(2), as applicable, and any other documentation, as applicable, to ensure a safe and effective transition of care.

**(3) Notice before transfer.** Before a facility transfers or discharges a resident, the facility must—

- (i) Notify the resident and the resident's representative(s) of the transfer or discharge and the reasons for the move in writing and in a language and manner they understand. The facility must send a copy of the notice to a representative of the Office of the State Long-Term Care Ombudsman.
- (ii) Record the reasons for the transfer or discharge in the resident's medical record in accordance with paragraph (c)(2) of this section; and
- (iii) Include in the notice the items described in paragraph (b)(5) of this section.

**(4) Timing of the notice.** (i) Except as specified in paragraphs (b)(4)(ii) and (b)(8) of this section, the notice of transfer or discharge required under this section must be made by the facility at least 30 days before the resident is transferred or discharged.

- (ii) Notice must be made as soon as practicable before transfer or discharge when—
- (A) The safety of individuals in the facility would be endangered under paragraph (b)(1)(ii)(C) of this section;
  - (B) The health of individuals in the facility would be endangered, under paragraph (b)(1)(ii)(D) of this section;
  - (C) The resident's health improves sufficiently to allow a more immediate transfer or discharge, under paragraph (b)(1)(ii)(B) of this section;
  - (D) An immediate transfer or discharge is required by the resident's urgent medical needs, under paragraph (b)(1)(ii)(A) of this section; or
  - (E) A resident has not resided in the facility for 30 days.

**(5) Contents of the notice.** The written notice specified in paragraph (b)(3) of this section must include the following:

- (i) The reason for transfer or discharge;
- (ii) The effective date of transfer or discharge;
- (iii) The location to which the resident is transferred or discharged;
- (iv) A statement of the resident's appeal rights, including the name, address (mailing and email), and telephone number of the entity which receives such requests; and information on how to obtain an appeal form and assistance in completing the form and submitting the appeal hearing request;
- (v) The name, address (mailing and email) and telephone number of the Office of the State Long-Term Care Ombudsman;
- (vi) For nursing facility residents with intellectual and developmental disabilities or related disabilities, the mailing and email address and telephone number of the agency responsible for the protection and advocacy of individuals with developmental disabilities established under Part C of the Developmental Disabilities Assistance and Bill of Rights Act of 2000 (Pub. L. 106–402, codified at 42 U.S.C. 15001 *et seq.*); and
- (vii) For nursing facility residents with a mental disorder or related disabilities, the mailing and email address and telephone number of the agency responsible for the protection and advocacy of individuals with a mental disorder established under the Protection and Advocacy for Mentally Ill Individuals Act.

**(6) Changes to the notice.** If the information in the notice changes prior to effecting the transfer or discharge, the facility must update the recipients of the notice as soon as practicable once the updated information becomes available.

**(7) Orientation for transfer or discharge.** A facility must provide and document sufficient preparation and orientation to residents to ensure safe and orderly transfer or discharge from



the facility. This orientation must be provided in a form and manner that the resident can understand.

**(8) Notice in advance of facility closure.** In the case of facility closure, the individual who is the administrator of the facility must provide written notification prior to the impending closure to the State Survey Agency, the Office of the State Long-Term Care Ombudsman, residents of the facility, and the resident representatives, as well as the plan for the transfer and adequate relocation of the residents, as required at § 483.70(l).

**Purpose and Intent of 483.15 Admission, transfer and Discharge Rights**

The facility policy guides the practices that promote the residents’ rights related to transfer and discharge and educates and informs staff practices for appropriate transfers and discharges of residents. The policy defines facility actions to protect the rights of residents to refuse transfer or discharge except in specific circumstances.

To assure that the individual facility has followed all the required steps for the development and implementation of a comprehensive transfer and discharge policy in accordance to the new Requirements of Participation (RoP), the following checklist captures specific action items for successful completion. The far left column represents the actual Requirements of Participation (RoP) language and the right column indicates specific leadership strategies for successful completion and implementation of the revised RoP. When preparing updated policies and procedures, it is recommended to include actual RoP language as applicable. Please note that CMS has not issued its interpretative guidance for the new Requirements of Participation (RoP), therefore additional updates may be necessary once the guidance is released.

**Suggested Checklist: Transfer and Discharge Policy and Procedure**

Regulation	Recommended Actions
Transfer and discharge-Facility requirements 483.15(c) (i) The facility must permit each resident to remain in the facility, and not transfer or discharge the resident from the facility unless— (A) The transfer or discharge is necessary for the resident’s welfare	<input type="checkbox"/> Review, revise and implement Transfer and Discharge Policies and Procedures in accordance with the new RoP.  <input type="checkbox"/> Ensure that the policy contains provisions to permit residents to remain in the facility unless: <ul style="list-style-type: none"> <li>• The resident’s needs cannot be met in the facility, thus discharge is necessary</li> </ul>



Regulation	Recommended Actions
<p>and the resident’s needs cannot be met in the facility;            (B) The transfer or discharge is appropriate because the resident’s health has improved sufficiently so the resident no longer needs the services provided by the facility;            (C) The safety of individuals in the facility is endangered due to the clinical or behavioral status of the resident;            (D) The health of individuals in the facility would otherwise be endangered;            (E) The resident has failed, after reasonable and appropriate notice, to pay for (or to have paid under Medicare or Medicaid) a stay at the facility. Nonpayment applies if the resident does not submit the necessary paperwork for third party payment or after the third party, including Medicare or Medicaid, denies the claim and the resident refuses to pay for his or her stay. For a resident who becomes eligible for Medicaid after admission to a facility, the facility may charge a resident only allowable charges under Medicaid; or            (F) The facility ceases to operate.</p>	<ul style="list-style-type: none"> <li>● The resident’s health has improved such that the resident no longer needs the services of the facility</li> <li>● The safety of people in the facility is endangered because of the resident’s clinical status or behavior</li> <li>● The resident has failed to pay for the stay or arrange to have Medicare or Medicaid pay for the stay if the resident is eligible for those programs. Non-payment applies if the resident does not submit required paperwork after Medicare or Medicaid denies a claim and the resident fails to pay.</li> <li>● For a resident who becomes eligible for Medicaid after admission the facility charges a resident only allowable charges under Medicaid;</li> <li>● The facility ceases to operate.</li> </ul> <p><input type="checkbox"/> Review and revise resident rights information provided to residents and representatives to ensure that the resident’s right related to discharge are reflected there.</p> <p><input type="checkbox"/> Review and revise staff education for orientation and annual training to reflect the resident rights information and policies and procedures for involuntary discharges.</p>
<p><b>(2) Documentation.</b>            When the facility transfers or discharges a resident under any of the circumstances specified in paragraphs (c)(1)(i)(A) through (F) of this section, the facility must ensure that the transfer or discharge is documented in the resident’s medical record and</p>	<p><input type="checkbox"/> Review, revise and implement a policy and procedure for documentation of transfers and discharges. The policy must include:</p> <ul style="list-style-type: none"> <li>● Documentation is required for all involuntary discharges</li> <li>● Documentation is made in the resident’s medical record by the resident’s</li> </ul>

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<p>appropriate information is communicated to the receiving health care institution or provider.</p> <p>(i) Documentation in the resident’s medical record must include:</p> <p>(A) The basis for the transfer per paragraph (c)(1)(i) of this section.</p> <p>(B) In the case of paragraph (c)(1)(i)(A) of this section, the specific resident need(s) that cannot be met, facility attempts to meet the resident needs, and the service available at the receiving facility to meet the need(s).</p> <p>(ii) The documentation required by paragraph (c)(2)(i) of this section must be made by—</p> <p>(A) The resident’s physician when transfer or discharge is necessary under paragraph (c)(1)(A) or (B) of this section; and</p> <p>(B) A physician when transfer or discharge is necessary under paragraph (b)(1)(i)(C) or (D) of this section.</p>	<p>physician for transfers when a resident’s needs cannot be met or the resident’s health has improved so that the resident does not need the services of the facility.</p> <ul style="list-style-type: none"> <li>• Documentation must be made by a physician when the safety of individuals in the facility is endangered due to the clinical or behavioral status of the resident or the health of individuals in the facility would otherwise be endangered</li> <li>• Documentation must include: <ul style="list-style-type: none"> <li>○ The basis for transfer</li> <li>○ The specific resident need(s) that cannot be met and the facility’s attempts to meet the need(s)</li> <li>○ The services available at the receiving facility that can meet the resident’s need(s)</li> </ul> </li> </ul> <p><input type="checkbox"/> Provide education for physician caring for residents in the facility about new requirements for discharge documentation.</p> <p><input type="checkbox"/> Review and revise the health record structure to include a location for discharge documentation from physicians.</p> <p><input type="checkbox"/> Review and revise staff education for orientation and annual training to reflect the resident rights information and policies and procedures for involuntary discharges documentation.</p>
<p><b>Information provided to the receiving provider</b> must include a minimum of the following:</p>	<p><input type="checkbox"/> Review and revise the policy and procedure for referral information sent to the post-discharge provider for involuntary discharges or transfers. Ensure that the</p>

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<p>(A) Contact information of the practitioner responsible for the care of the resident</p> <p>(B) Resident representative information including contact information.</p> <p>(C) Advance Directive information.</p> <p>(D) All special instructions or precautions for ongoing care, as appropriate.</p> <p>(E) Comprehensive care plan goals,</p> <p>(F) All other necessary information, including a copy of the residents discharge summary, consistent with § 483.21(c)(2), as applicable, and any other documentation, as applicable, to ensure a safe and effective transition of care.</p>	<p>policy provision of the following information:</p> <ul style="list-style-type: none"> <li>• Contact information of the provider caring for the resident.</li> <li>• Contact information for the resident’s representative</li> <li>• Advance Directive information</li> <li>• Special instructions for ongoing care or precautions for care</li> <li>• Comprehensive care plan goals</li> <li>• The discharge summary</li> <li>• All other necessary information to provide for continuity of care for the resident.</li> <li>• Consider these additional documents: <ul style="list-style-type: none"> <li>○ Physician summary orders</li> <li>○ Medication administration records</li> <li>○ Treatment records</li> <li>○ The last 15 months of MDS assessments</li> <li>○ The most recent H&amp;P and provider visit notes</li> <li>○ Relevant IDT progress notes</li> </ul> </li> </ul> <p><input type="checkbox"/> Develop a transfer/discharge checklist for staff uses to prepare for involuntary discharge of a resident.</p> <p><input type="checkbox"/> Educate nurses, social workers, unit clerks and medical records staff about the discharge documentation requirements.</p> <p><input type="checkbox"/> Implement a monitoring system to ensure that required and relevant documents are send to post-discharge providers for resident involuntarily discharged.</p>

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Regulation	Recommended Actions
<p><b>(3) Notice before transfer.</b> Before a facility transfers or discharges a resident, the facility must—</p> <p>(i) Notify the resident and the resident’s representative(s) of the transfer or discharge and the reasons for the move in writing and in a language and manner they understand. The facility must send a copy of the notice to a representative of the Office of the State Long-Term Care Ombudsman.</p> <p>(ii) Record the reasons for the transfer or discharge in the resident’s medical record in accordance with paragraph (c)(2) of this section; and</p> <p>(iii) Include in the notice the items described in paragraph (b)(5) of this Section.</p> <p><b>(4) Timing of the notice.</b> (i) Except as specified in paragraphs (b)(4)(ii) and (b)(8) of this section, the notice of transfer or discharge required under this section must be made by the facility at least 30 days before the resident is transferred or discharged.</p> <p>(ii) Notice must be made as soon as practicable before transfer or discharge when—</p> <p>(A) The safety of individuals in the facility would be endangered under paragraph (b)(1)(ii)(C) of this section;</p> <p>(B) The health of individuals in the facility would be endangered, under paragraph (b)(1)(ii)(D) of this section;</p> <p>(C) The resident’s health improves sufficiently to allow a more immediate transfer or discharge, under paragraph (b)(1)(ii)(B) of this section;</p>	<p><input type="checkbox"/> Review and revise the facility policy and procedure for issuing the discharge notice before transfer. Ensure that the policy includes:</p> <ul style="list-style-type: none"> <li>• The notice will contain the reason for transfer/discharge and the reason for the move</li> <li>• The notice will be issued in a language and manner the resident and representative can understand</li> <li>• A copy of the notice will be sent to the Long Term Care Ombudsman office.</li> <li>• The reason for the transfer/discharge will be documented in the resident’s medical record including the required components of the notice.</li> <li>• Issuance of the notice 30 days in advance of the discharge date or</li> <li>• Notice is issued as soon as practicable if the resident is discharged urgently because the safety of others in the facility is endangered or the health of individuals in the facility would be endangered.</li> <li>• Notice is issued as soon as practicable if the resident’s health improves sufficiently to allow a more immediate transfer or discharge, or an immediate transfer or discharge is required by the resident’s urgent medical needs,</li> <li>• Notice is issued as soon as practicable if the resident has not resided in the facility for 30 days.</li> <li>• If there is a change to any information in the notice prior to the effective date of discharge, the notice will be updated and provided to the required parties.</li> </ul>

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<p>(D) An immediate transfer or discharge is required by the resident’s urgent medical needs, under paragraph (b)(1)(ii)(A) of this section; or</p> <p>(E) A resident has not resided in the facility for 30 days</p> <p><b>(5) Contents of the notice.</b> The written notice specified in paragraph (b)(3) of this section must include the following:</p> <p>(i) The reason for transfer or discharge;</p> <p>(ii) The effective date of transfer or discharge;</p> <p>(iii) The location to which the resident is transferred or discharged;</p> <p>(iv) A statement of the resident’s appeal rights, including the name, address (mailing and email), and telephone number of the entity which receives such requests; and information on how to obtain an appeal form and assistance in completing the form and submitting the appeal hearing request;</p> <p>(v) The name, address (mailing and email) and telephone number of the Office of the State Long-Term Care Ombudsman;</p> <p>(vi) For nursing facility residents with intellectual and developmental disabilities or related disabilities, the mailing and email address and telephone number of the agency responsible for the protection and advocacy of individuals with developmental disabilities established under Part C of the Developmental Disabilities Assistance and Bill of</p>	<p><input type="checkbox"/> Ensure that the policy includes stipulations that the discharge notice contains:</p> <ul style="list-style-type: none"> <li>• The reason for transfer/discharge</li> <li>• The effective date of transfer/discharge</li> <li>• The location to which the resident will be transferred</li> <li>• A statement of the resident’s right to appeal</li> <li>• The name, mailing address, email address and telephone number of the agency that receives discharge appeal requests.</li> <li>• Information about how to obtain an appeal form and the title of the facility staff who will assist the resident to complete and submit the form</li> <li>• The name, mailing address, email address and telephone number of the State Long Term Care Ombudsman’s office</li> <li>• For facilities with residents with intellectual and developmental disabilities or related disabilities, the mailing and email address and telephone number of the agency responsible for the protection and advocacy of individuals with developmental disabilities developmental , or related disabilities; the mailing address , email address and</li> <li>• telephone number of the agency responsible for the protection and advocacy of individuals with developmental disabilities. State advocacy agency listing can be found at: Administration for Community Living – US Department of HHS</li> </ul>

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<p>Rights Act of 2000 (Pub. L. 106–402, codified at 42 U.S.C. 15001 <i>et seq.</i>); and</p> <p>(vii) For nursing facility residents with a mental disorder or related disabilities, the mailing and email address and telephone number of the agency responsible for the protection and advocacy of individuals with a mental disorder established under the Protection and Advocacy for Mentally Ill Individuals Act</p> <p><b>(6) Changes to the notice.</b> If the information in the notice changes prior to effecting the transfer or discharge, the facility must update the recipients of the notice as soon as practicable once the updated information becomes available.</p>	<ul style="list-style-type: none"> <li>● For facilities with residents with a mental disorder or related disabilities, the mailing and email address and telephone number of the agency responsible for the protection and advocacy of individuals with a mental disorder established under the Protection and Advocacy for Mentally Ill Individuals Act.</li> </ul> <p><input type="checkbox"/> Review and revise the discharge notice form or letter currently used by the facility. Ensure that the required components, as listed above are contained in the notice.</p> <p><input type="checkbox"/> Review and revise staff education for orientation and annual training to reflect the resident rights information and policies and procedures for involuntary discharges, documentation requirements and issuance of the discharge notice.</p> <p><input type="checkbox"/> Develop and implement a monitoring process to ensure that discharge notices are completed with the required information</p> <p><input type="checkbox"/> Develop and implement a monitoring process to ensure that a discharge notice is revised if information changes prior to the resident’s discharge date and that the revised notice is distributed to the required parties.</p>
<p><b>(7) Orientation for transfer or discharge.</b> A facility must provide and document sufficient preparation and orientation to residents to ensure safe and orderly transfer or discharge from the facility. This orientation</p>	<p><input type="checkbox"/> Review and revise the policy and procedure for issuing a discharge notice to ensure that the policy stipulates that</p> <ul style="list-style-type: none"> <li>● The facility will provide the resident with sufficient preparation and orientation to the upcoming</li> </ul>

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<p>must be provided in a form and manner that the resident can understand.</p>	<p>discharge to ensure that the discharge is safe and orderly.</p> <ul style="list-style-type: none"><li>• Provide the discharging resident with information about where he/she is going.</li><li>• The facility will work with the resident and family to ensure that valued possessions are not left behind</li><li>• The facility will orient the staff in the receiving facility about the care needs of the resident, the daily patterns and preferences</li><li>• The facility will minimize unnecessary and avoidable anxiety or depression for the discharging resident</li><li>• The preparation and orientation will be provided in a forma and manner the resident can understand</li><li>• The preparation and orientation to discharge will be documented in the resident’s medical record.</li></ul> <p><input type="checkbox"/> Educate staff including nurses and social workers about orientation for the discharging resident and the receiving facility.</p> <p><input type="checkbox"/> Include measures take for orientation and preparation in the resident’s discharge care plan.</p> <p><input type="checkbox"/> Monitor and document the resident’s response to discharge orientation and provide support as needed.</p>

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Regulation	Recommended Actions
<p>(8) <i>Notice in advance of facility closure.</i> In the case of facility closure, the individual who is the administrator of the facility must provide written notification prior to the impending closure to the State Survey Agency, the Office of the State Long-Term Care Ombudsman, residents of the facility, and the resident representatives, as well as the plan for the transfer and adequate relocation of the residents, as required at § 483.70(l).</p>	<p><input type="checkbox"/> Only if applicable. The facility will need to follow the specific State requirements for facility or unit close as well as State relocation requirements</p> <p>Review and revise the policy and procedure for issuing a discharge notice to ensure that the policy stipulates that the Administrator will provide written notice of ending closure to the State Survey Agency, The State Long Term Care Ombudsman, the residents and their representatives. Per the regulations - The Administrator will provide an adequate relocation and the plan and to the State Survey Agency, The State Long Term Care Ombudsman, the residents and their representatives.</p>

The below areas serves as a cross reference for facility leaders to conduct addition policy and procedure review across departments to incorporate the changes set forth in § 483.15 (c) Transfer and discharge. This listing is not all encompassing however should serve as a resource for leaders as they update their internal policies, procedures and operational processes.

- Resident Bill of Rights
- Resident Handbook
- Discharge Policy
- Discharge Summary
- Admission Agreement
- Discharge transfer and referral policy
- Grievance
- Grievance Official Role and Responsibility
- Social Services
- Medical Director – Role and Responsibility
- Resident Rights Postings
- Appeal Process with Agency and State Contacts
- New Employee Orientation for social worker, nurse leaders, staff nurses, unit clerk and medical records staff
- Medical records policies for physician discharge note and discharge notice
- Facility Wide Resource Assessment – Phase II
- Quality Assurance and Performance Improvement

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