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## The Question 'To Admit, or Not to Admit?' Poses Far-Reaching Consequences for SNF-Hospital Partnerships

SNFs that choose to stop new admissions and/or COVID-19 positive cases during the crisis are risking the strength and integrity of hospital partnerships going forward. Alternatively – by being responsive and innovative – SNFs can reinforce important strategic partnerships and invest in their future.

For example, many forward-thinking SNFs have adopted an aggressive approach to treating COVID-19 patients and have quickly executed on tangible solutions such as:

### **Adapting Infrastructure & Logistics**

- Transferring patients to alternative sites, wings or designated beds
- Constructing walls to separate units
- Making separate entrances to accommodate COVID-19 admissions

### **Leveraging CMS Mandates/Waivers**

- Focusing on 'skill in place' alternatives to allow critical beds to be used for higher acuity patients
- Directly admitting patients without a 3-day stay

### **Preparing Staff/IDT**

- Assure [nursing] clinical capabilities for respiratory conditions
- Maintain ample PPE supply chain (perhaps by collaborating with hospital partners)
- Demonstrate effective/proper infection control policies, procedures, process, and checks
- Strengthen MDS/coding resources to assure compliant, optimal clinical reimbursement
- Proactive clinical guidance for direct care staff (nursing and therapy) to support safest possible environment

### **Accommodating/Facilitating Transitions Between Levels of Care**

- Accept LTC residents back from the hospital and support a 14-day quarantine
  - Accept new patients (COVID-19 positive and general admissions)

In addition to helping to fight this national public health emergency, SNFs have proven they can adapt to hospitals' discharge needs – even amidst a global pandemic – and will generate:

- Long-standing credibility;
- Reputation as an indispensable partner capable of meaningful contributions; and
- Differentiation of clinical capabilities and operational agility.

Even if COVID-19 isn't locally widespread, SNFs would be well advised to develop adaptive strategies to demonstrate ability & willingness to meet community and hospital needs. For example, showcase infection control processes so that hospital partners will know to count on your SNF as a trusted, progressive partner. (Focus on infection control will also help prepare for inevitable surveys, support QMs/Star Ratings, and changes that will continue to matter even after this immediate crisis.) Also, proactively communicate with peer SNFs, ALs, ILs, and Home Health Agencies to collaboratively manage post-acute COVID-19 patients at the most appropriate level of care so as to reduce the burden on local hospital resources.

As SNF operators weigh the risks and benefits of countless strategic and operational decisions since the COVID-19 outbreak, many SNFs nationwide have considered the perspective of their overburdened hospital systems: **A true partnership requires commitment in 'good times' as well as amidst a crisis.** After all, this is every SNF's opportunity to offer meaningful solutions, prepare for unforeseen scenarios, and ultimately prove their worth as the referring hospital's essential strategic partner.