



SWING BED SERVICES



The Hyperlink Table, at the end of this document, provides the complete URL for each hyperlink.

Learn about these swing bed services topics:

- Background
- Hospital requirements
- Critical Access Hospital (CAH) requirements
- Payments
- Resources
- Lists of helpful websites and Regional Office Rural Health Coordinators

BACKGROUND

Hospitals, defined in [Social Security Act \(SSA\) § 1861\(e\)](#), and CAHs approved to provide swing bed services may use their beds for acute care or post-hospital Skilled Nursing Facility (SNF) care. These rural hospitals and CAHs increase Medicare beneficiary access to post-acute SNF care.

Medicare requires a 3-day qualifying inpatient hospital or CAH stay prior to admitting a beneficiary to a swing bed in any hospital or CAH, or admission to a SNF. The Medicare beneficiary's swing bed stay must be within the same spell of illness as the qualifying stay.

A hospital or CAH does not have to locate their swing beds in a special section of the facility unless the hospital or CAH requires it. Approved swing bed hospitals or CAHs may use any acute care inpatient bed within the hospital or CAH to provide swing bed services, except the acute care inpatient beds that are used for:

- IPPS-excluded rehabilitation or psychiatric distinct part units (DPUs)
- Intensive care-type units
- Newborns

Documentation of the acute care discharge and admission to swing bed status must be in the beneficiary's medical record. The medical record must include:

- Acute care discharge orders including a discharge summary
- Admission orders to swing bed status (whether the beneficiary stays in the same hospital or CAH or transfers to an approved swing bed hospital or CAH)
- Appropriate progress notes

HOSPITAL REQUIREMENTS

To get and retain post-acute swing bed SNF-level care approval, hospitals must:

- Be in a rural area, including all areas not defined as urban by the most recent, published U.S. Census Bureau data (an urban "cluster area" is not included)
- Have fewer than 100 beds (excluding beds for newborns and intensive care-type units)
- Have a Medicare hospital provider agreement
- Have not had swing bed approval terminated within 2 years prior to application resubmission
- Have not had a 24-hour nursing waiver granted (Code of Federal Regulations [CFR] [42 C.F.R. § 488.54\(c\)](#))
- Comply with these ([42 C.F.R. § 482.58\(b\)\(1–8\)](#)) SNF participation requirements:
 - Residents' rights
 - Admission, transfer, and discharge rights

- Freedom from abuse, neglect, and exploitation
- Patient activities
- Social services
- Discharge planning
- Specialized rehabilitative services
- Dental services

CAH REQUIREMENTS

CAHs must comply with the ([42 C.F.R. § 485.645\(d\)\(1–9\)](#)) SNF participation requirements:

- Residents' rights
- Admission, transfer, and discharge rights
- Freedom from abuse, neglect, and exploitation
- Patient activities
- Social services
- Comprehensive assessment, comprehensive care plan, and discharge planning (CAHs are not required to use the resident assessment instrument (RAI) or to comply with the requirements for frequency, scope, and number of assessments)
- Specialized rehabilitative services
- Dental services
- Nutrition

A CAH may maintain no more than 25 inpatient beds. A CAH with Medicare swing bed approval may use any of its inpatient beds for either inpatient or SNF-level services. A CAH may also operate a DPU (rehabilitation or psychiatric), each with up to 10 beds; however, it may not use a bed within these units for swing bed services.

PAYMENTS

Medicare pays hospital offering swing bed SNF-level services (excluding CAHs) under the [SNF Prospective Payment System](#) (PPS). The SNF PPS covers all beneficiary-provided services under a Medicare Part A covered SNF stay (ancillary, routine, and capital), except some separately-payable Part B services. Go to the [Skilled Nursing Facility Prospective Payment System](#) booklet for more information.

Medicare exempts CAH swing bed services from the SNF PPS and pays them based on 101 percent of the reasonable cost of the services. Go to the [Critical Access Hospital](#) and [Medicare Billing Information for Rural Providers and Suppliers](#) booklets for more information.

RESOURCES

Table 1. Swing Bed Services Resources

For More Information About...	Resource
State Operations Manual Appendix A (for Hospitals)	CMS.gov/Regulations-and-Guidance/Guidance/Manuals/downloads/som107ap_a_hospitals.pdf
State Operations Manual Appendix W (for CAHs)	CMS.gov/Regulations-and-Guidance/Guidance/Manuals/Downloads/som107ap_w_cah.pdf
Swing Bed Services	CMS.gov/Medicare/Medicare-Fee-for-Service-Payment/SNFPPS/SwingBed.html CMS.gov/Regulations-and-Guidance/Guidance/Manuals/Downloads/bp102c08.pdf CMS.gov/Regulations-and-Guidance/Guidance/Manuals/Downloads/clm104c06.pdf

Table 2. Hyperlink Table

Embedded Hyperlink	Complete URL
42 C.F.R. § 482.58(b)(1–8)	https://www.ecfr.gov/cgi-bin/retrieveECFR?gp=&SID=efeb9797d1c6ad8aa29113fc0f5bf1fc&mc=true&r=PART&n=pt42.5.482#se42.5.482_158
42 C.F.R. § 485.645(d)(1–9)	https://www.ecfr.gov/cgi-bin/retrieveECFR?gp=&SID=efeb9797d1c6ad8aa29113fc0f5bf1fc&mc=true&r=PART&n=pt42.5.485#se42.5.485_1645
42 C.F.R. § 488.54(c)	https://www.ecfr.gov/cgi-bin/text-idx?SID=efeb9797d1c6ad8aa29113fc0f5bf1fc&mc=true&node=pt42.5.488&rgn=div5#se42.5.488_154
Critical Access Hospital	https://www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNProducts/MLN-Publications-Items/CMS1243364.html
Medicare Billing Information for Rural Providers and Suppliers	https://www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNProducts/MLN-Publications-Items/CMS1243515.html
Social Security Act (SSA) § 1861(e)	https://www.ssa.gov/OP_Home/ssact/title18/1861.htm#act-1861-e

Table 2. Hyperlink Table (Cont.)

Embedded Hyperlink	Complete URL
Skilled Nursing Facility Prospective Payment System	https://www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNProducts/MLN-Publications-Items/CMS1243671.html
SNF Prospective Payment System	https://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/SNFPPS

HELPFUL WEBSITES

American Hospital Association Rural Health Care

<https://www.aha.org/advocacy/small-or-rural>

Critical Access Hospitals Center

<https://www.cms.gov/Center/Provider-Type/Critical-Access-Hospitals-Center.html>

Disproportionate Share Hospitals

<https://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/AcuteInpatientPPS/dsh.html>

Federally Qualified Health Centers Center

<https://www.cms.gov/Center/Provider-Type/Federally-Qualified-Health-Centers-FQHC-Center.html>

Health Resources and Services Administration

<https://www.hrsa.gov>

Hospital Center

<https://www.cms.gov/Center/Provider-Type/Hospital-Center.html>

Medicare Learning Network®

<http://go.cms.gov/MLNGenInfo>

National Association of Community Health Centers

<http://www.nachc.org>

National Association of Rural Health Clinics

<https://narhc.org>

National Rural Health Association

<https://www.ruralhealthweb.org>

Rural Health Clinics Center

<https://www.cms.gov/Center/Provider-Type/Rural-Health-Clinics-Center.html>

Rural Health Information Hub

<https://www.ruralhealthinfo.org>

Swing Bed Providers

<https://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/SNFPPS/SwingBed.html>

Telehealth

<https://www.cms.gov/Medicare/Medicare-General-Information/Telehealth>

Telehealth Resource Centers

<https://www.telehealthresourcecenter.org>

U.S. Census Bureau

<https://www.census.gov>

REGIONAL OFFICE RURAL HEALTH COORDINATORS

To find contact information for CMS Regional Office Rural Health Coordinators who provide technical, policy, and operational assistance on rural health issues, refer to [CMS.gov/Outreach-and-Education/Outreach/OpenDoorForums/Downloads/CMSRuralHealthCoordinators.pdf](https://www.cms.gov/Outreach-and-Education/Outreach/OpenDoorForums/Downloads/CMSRuralHealthCoordinators.pdf).

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