

## Medical Policy

### Administratively Necessary Days (Mass General Brigham ACO only)

**Policy Number: 069**

#### **Overview**

Consistent with MassHealth regulations described in 130 CMR 415 and 130 CMR 435, members of the Mass General Brigham ACO are entitled to administratively necessary days in an acute inpatient hospital or in a chronic disease and rehabilitation inpatient hospital when hospitalization at that level of care is no longer medically necessary but a safe discharge plan is not yet available, and when certain criteria are met.

#### **Criteria for administratively necessary days:**

##### **Acute inpatient hospital**

Mass General Brigham ACO covers administratively necessary days in an acute inpatient hospital when **all** of the following criteria are met:

1. the member requires admission to a hospital or continued stay in a hospital for reasons other than the need for services that can only be provided in an acute inpatient hospital; and
2. the hospital is making regular efforts to discharge the recipient to the appropriate setting; and
3. the reason for admission or continued stay is not because of the hospital's administrative or operational delays; and
4. the member, or the member's family, or any person legally responsible for the member, has not refused placement(s) or service(s) that Mass General Brigham Health Plan determines to be appropriate and within a reasonable distance from the member's usual residence; and
5. the hospital has not refused or neglected to discharge the patient to an available placement or service that Mass General Brigham Health Plan determines to be appropriate and within a reasonable distance from the member's usual residence.

##### **Chronic disease and rehabilitation hospital: members younger than 21 years of age**

Mass General Brigham ACO covers up to 30 administratively necessary days in a chronic disease and rehabilitation hospital when the member's care needs could be met in a setting other than a chronic disease or rehabilitation hospital, and when the member is clinically ready for discharge. After the first 30 administratively necessary days, Mass General Brigham ACO may cover additional administratively necessary days in a chronic disease and rehabilitation inpatient hospital if the hospital demonstrates **all** of the following:

1. it has experienced extraordinary difficulty in placing the member, and has documented the specific reasons for such extraordinary difficulty; and
2. it has exhaustively explored all potential appropriate placements; and
3. the hospital is making regular efforts to discharge the recipient to an appropriate setting; and
4. the reason for admission or continued stay is not because of the hospital's administrative or operational delays; and

5. the member, or the member's family, or any person legally responsible for the member, has not refused placement(s) or service(s) that Mass General Brigham Health Plan determines to be appropriate and within a reasonable distance from the member's usual residence; and
6. the hospital has not refused or neglected to discharge the patient to an available placement or service that Mass General Brigham Health Plan determines to be appropriate and within a reasonable distance from the member's usual residence.

**Chronic disease and rehabilitation hospital: members 21 years of age and older**

Mass General Brigham ACO does not pay for the first 45 administratively necessary days in a chronic disease or rehabilitation hospital when the member's care needs could be met in a setting other than a chronic disease or rehabilitation hospital, and when the member is clinically ready for discharge. After the first (non-payable) 45 administratively necessary days, Mass General Brigham ACO may cover additional administratively necessary days in a chronic disease and rehabilitation inpatient hospital if the hospital demonstrates **all** of the following:

1. it has experienced extraordinary difficulty in placing the member, and has documented the specific reasons for such extraordinary difficulty; and
2. it has exhaustively explored all potential appropriate placements; and
3. the hospital is making regular efforts to discharge the recipient to an appropriate setting; and
4. the reason for admission or continued stay is not because of the hospital's administrative or operational delays; and
5. there are no placement(s) or service(s), which Mass General Brigham Health Plan determines to be appropriate and within a reasonable distance from the member's usual residence, that have been refused by the member, the member's family, or any person legally responsible for the member; and
6. the hospital has not refused or neglected to discharge the patient to an available placement or service, which Mass General Brigham Health Plan determines to be appropriate and within a reasonable distance from the member's usual residence.

**Examples of situations that may require administratively necessary days**

Administratively necessary days may be necessary in situations that include, but are not limited to, the following:

1. the member is awaiting transfer to a facility providing a lower level of care such as:
  - a. a nursing facility; or
  - b. a chronic disease or rehabilitation hospital (if the member is currently in an acute inpatient hospital); or
  - c. any other institutional placement; or
2. the member is awaiting arrangement of home services (nursing, home health aide, durable medical equipment, personal care attendant, therapies, or other community-based services); or
3. the member is awaiting arrangement of residential, social, psychiatric, or medical services by a public or private agency; or
4. the member has lead poisoning and is awaiting deleading of their residence; or
5. the member is awaiting results of a report of abuse or neglect made to any public agency charged with the investigation of such reports; or



6. the member is in the custody of the Department of Social Services and is awaiting foster care when other temporary living arrangements are unavailable or inappropriate; or
7. the member cannot be treated or maintained at home because the primary caregiver is absent due to medical or psychiatric crisis, and a substitute caregiver is not available; or
8. the member requires skilled nursing or other skilled services that cannot be arranged at home, including (but not limited to):
  - a. maintenance of tube feedings;
  - b. ventilator management;
  - c. dressings, irrigations, packing, and other wound treatments;
  - d. routine administration of medications;
  - e. therapies, such as respiratory, speech, physical, and occupational;
  - f. insertion, irrigation, and replacement of catheters; and
  - g. intravenous, intramuscular, or subcutaneous injections, or intravenous feedings (for example, total parenteral nutrition).

### **Definitions**

**Administratively Necessary Day:** A day of hospitalization on which an enrollee's care needs can be provided in a setting other than the present one, and on which an enrollee is clinically ready for discharge, but for whom an appropriate setting is not available.

**Reasonable distance:** Generally, 25 miles from the home or usual noninstitutional residence of the member, provided, however, that greater distances may be considered reasonable under certain circumstances, including but not limited to those where:

1. the residence is in a rural area,
2. the member has no family or regular visitors, or
3. the member requires specialized services only available at facilities located at greater distances.

### **Effective**

June 2025: Annual update.

May 2024: Annual Update.

November 2023: Effective Date.

### **References**

The Commonwealth of Massachusetts. Division of Medical Assistance. MassHealth Provider Manual Series. Acute Inpatient Hospital Services. Program Regulations. 130 CMR 415.000.

The Commonwealth of Massachusetts. Division of Medical Assistance. Chronic Disease And Rehabilitation Inpatient Hospital Services. Program Regulations. 130 CMR 435.000.

