

REPORT HIGHLIGHTS



March 2024 | OEI-01-18-00251

Concerns Remain About Safeguards To Protect Residents During Facility-Initiated Discharges From Nursing Homes

Why OIG Did This Review

- Facility-initiated discharges that do not follow Federal regulations can be unsafe and traumatic, leading to resident harm.
- CMS and State Long-Term Care Ombudsmen have raised concerns about the extent to which nursing homes follow Federal requirements for these discharges.
- This review provides insights into a sample of facility-initiated discharges from nursing homes and the extent to which these discharges followed Federal requirements.

What OIG Found

In most (107 out of 126) of the facility-initiated discharge cases in our review, nursing homes discharged residents for allowable reasons; however, our review raises concerns about nursing homes' understanding of and compliance with notice and documentation requirements for facility-initiated discharges.

- **Nursing homes sometimes fell short in providing required documentation**, such as documentation that the receiving facility could provide services that meet residents' needs.
- **Nursing homes often failed to notify residents of their discharges and frequently omitted required information in notices**, which may have compromised residents' rights and abilities to plan for safe transitions.
- **Even when nursing homes provided the resident with a facility-initiated discharge notice, only about half sent a copy of the notice to the Ombudsman, as required**, potentially impeding the Ombudsman's ability to effectively advocate for residents.

We also found that nursing homes struggled to identify facility-initiated discharges, which may present CMS and State survey agencies with challenges in overseeing these discharges during the survey process.

What OIG Recommends

1. CMS provide a standard notice template to help nursing homes provide complete and accurate information to residents facing discharge and Ombudsmen.
2. CMS require nursing homes to systematically document facility-initiated discharges in information available to CMS and States to enhance oversight.

CMS did not explicitly state its concurrence or nonconcurrence for the two recommendations.