Medications and Discharge

The Section for Long-Term Care Regulation (SLCR) has recently received questions related to the procedure for releasing medications upon a resident’s discharge from a Medicare/Medicaid certified facility.

§483.20(1)(3) states: A post-discharge plan of care that is developed with the participation of the resident and his or her family, which will assist the resident to adjust to his or her new living environment. A “post-discharge plan of care” means the discharge planning process which includes: assessing continuing care needs and developing a plan designed to ensure the individual’s needs will be met after discharge from the facility into the community.

Ensuring that the discharging resident has immediate access to medications is considered part of the nursing facility’s responsibility in planning post-discharge care. It is a requirement that a physician’s order be obtained and instructions given before releasing any medication(s) to the resident or the resident’s designee. Furthermore, the facility shall maintain records of medication(s) released to the resident, designee or to the pharmacy upon discharge. The type of pay for the medications should be considered when deciding whether or not to request a physician’s order to send the current medications at the facility with the resident. Medicare Part A resident’s medications are covered under the Skilled Nursing Facility Prospective Payment System (SNF PPS) per the Medicare Benefits Policy Manual. Medicaid resident’s medications are paid by the state Medicaid agency (MO HealthNet).

Private pay residents who have paid for their medications should be given the choice of taking current medications with them or not. They should have the option of returning unused unit dose medication to the pharmacy for credit. The facility needs to consider beforehand whether they require prescriptions upon discharge and make arrangements with the physician accordingly.

For Medicare Part A PPS residents, the facility is required to pay for all medications while the resident is in the Medicare stay. Upon discharge from the Medicare stay, the facility would not be expected to send the unused current medications with the resident. However, the facility is expected to foresee that the resident will need prescriptions filled and make arrangements with the physician to call in prescriptions to the pharmacy of the resident/designee’s choice.

For Medicaid residents, MO HealthNet has paid for the current medications at the facility. This means that the medications should be released to the resident/designee upon transfer/discharge to home or another long-term care facility. The facility’s discharge planning team needs to request an order from the physician to release medications to the resident/designee. If the physician refuses to give the order then other arrangements for prescriptions need to be made in advance of the discharge.

Medications are just one important consideration when discharging residents from your facility. This is why there is the post discharge plan of care requirement. Proper discharge takes careful consideration and planning ahead. Make sure your care planning team is aware of these requirements.