

year ending six (6) or more months after the certification date, at which time the Department shall establish a per diem rate pursuant to this rule.

(b) Change of ownership.

(i) A nursing facility which has a change of ownership on or after August 1, 1992, shall receive the per diem rate in effect for that nursing facility on the date of the change of ownership. This per diem rate shall remain in effect until the end of the first fiscal year ending six (6) or more months after the date of the change of ownership, at which time the Department shall establish a per diem rate pursuant to this rule.

(ii) Record keeping requirements. The former owner shall be responsible for maintaining all medical and financial records for one (1) year after the date of the change of ownership. If the nursing facility is involved in an audit or administrative or judicial proceedings which require access to such records, the records must be maintained until the completion of all proceedings, including any applicable appeal periods.

(c) Other facilities. The per diem rate for all other facilities shall be established pursuant to the other provisions of this Chapter.

(d) Effective dates of per diem rates. Per diem rates are established prospectively and shall remain in effect from the rate effective date until re-determined pursuant to this rule.

(e) Effective February 1, 2013 the per diem amount for nursing homes operated under 93-638 PL will be \$226.00. This rate will be updated each year to coincide with the release of the Office of Management and Budget (OMB) IHS Reimbursement Rates published in the Federal Register. The updated daily per diem amount will be calculated by inflating Wyoming Medicaid's previous years set rates by the percentage of increase/decrease of the current year's OMB outpatient per visit rate (excluding Medicare rates).

Section 8. Medicaid Reimbursement for Reserve Bed Days

(a) Reserved bed days.

(i) Facilities may receive the per diem rate for reserved bed days during temporary absences if an appropriate bed is not available during the time for which reimbursement is sought. For purposes of this section, "appropriate bed" means a bed in an empty room or a vacant bed in a room occupied by a person of the same sex as the temporarily absent client.

(ii) Reimbursement for temporary absences is limited to fourteen (14) days per calendar year.

(iii) If a nursing facility maintains an average occupancy of ninety (90%) or more within the month of the leave, it may receive the per diem rate for reserved bed days during temporary absences. Occupancy is calculated as total patient days (period of service rendered to a patient not including any day that a patient was temporarily absent) divided by licensed beds times the number of calendar days in the period being measured.

(iv) A provider may not bill a client or the client's family for reserved bed days that are not reimbursed pursuant to this section unless the nursing facility has informed the client, in writing, before the period for which reimbursement is sought of the client's option to make payments to hold the bed if the temporary absence exceeds the period for which Medicaid reimbursement is available.

Section 9. Cost Components

(a) General requirements. Cost shall be allocated among the following cost components as specified in this section: (1) Healthcare costs; (2) Capital costs; (3) Operating costs for purposes of

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