



Swing Bed Programs **Navigating the Pre-Admission Process**

Valorie Clouse & Dena Klockman
August 19, 2025

Overview of Swing Bed Pre-Admission



Purpose: Ensure appropriate transition to swing bed care.



Includes eligibility screening, documentation, education, & coordination.



Involves multiple stakeholders: Facility leadership, coordinators, case managers, UR, & physicians.



Roles & Responsibilities

Facility Leadership

- Ensure policies & procedures align with CMS regulations
- Support interdisciplinary collaboration & resource allocation
- Monitor quality metrics & patient outcomes
- Oversee compliance with documentation & admission criteria

Swing Bed Coordinator

- Coordinate pre-admission screening & documentation
- Ensure SB-MDS initiation & completeness
- Communicate with patients/families about swing bed services
- Track referrals, authorizations, & admission readiness

Case Manager

- Assess discharge readiness & skilled need
- Educate patients/families on post-acute options
- Document patient choice & quality data sharing
- Coordinate with interdisciplinary team for smooth transition

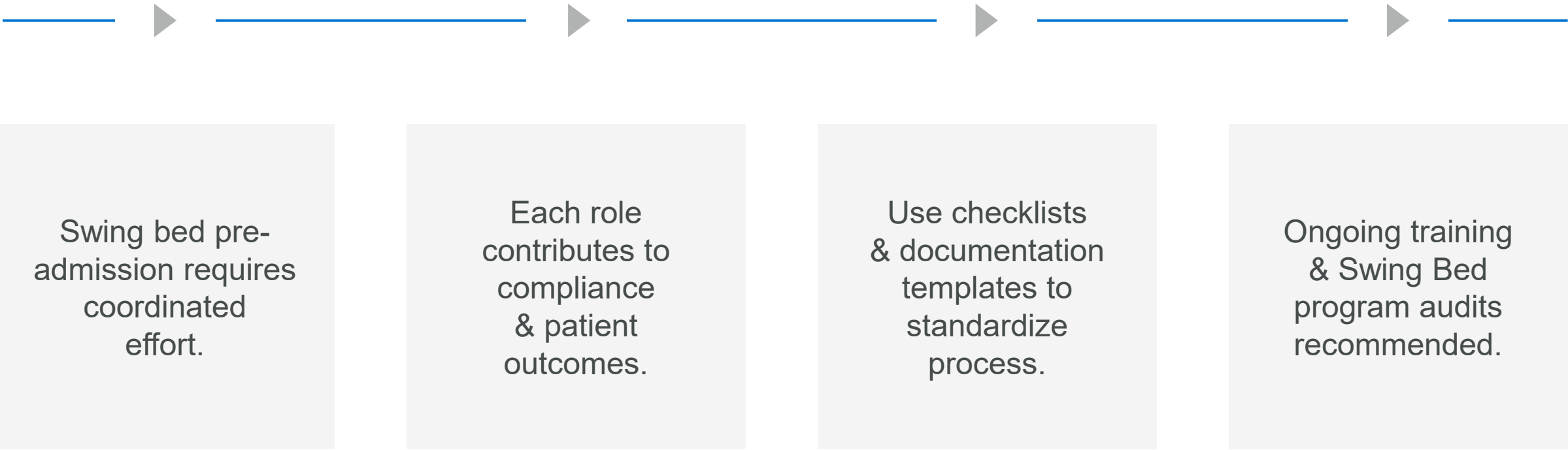
Utilization Review (UR)

- Verify three-day qualifying stay & medical necessity
- Ensure compliance with Medicare /insurance requirements
- Review documentation for completeness & accuracy
- Support appeals & denials management if needed

Physician

- Certify skilled need & medical stability
- Write discharge & swing bed admission orders
- Participate in care planning & documentation
- Serve as attending or coordinate with assigned provider

Summary & Next Steps





Swing Bed Pre-Admission Preparedness Checklist



Eligibility Criteria



Medically stable patient



Requires daily skilled nursing or rehab services



Three-day qualifying inpatient hospital stay (Medicare)



Transfer to swing bed within 30 days of discharge



Exclusions:

Dialysis, chemotherapy,
ventilator support,
psychiatric diagnoses

Clinical Review



Care Management
team evaluates
medical stability
& skilled needs.



Review of
discharge plan
& goals of care.



Assessment
of hospital's
ability to meet
patient needs.



Pre-Admission Coordination



Multidisciplinary team review: Nursing, Rehab, Pharmacy, Dietary.



Ensure service availability & appropriateness.



Document team review notes & admission readiness checklist.

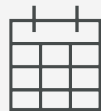
Patient & Family Education



Explain swing
bed services
& alternatives.



Discuss patient
rights &
provider choice.



Review expected
length of stay
& discharge
planning.



Document
education
acknowledgment
& provider choice.

Admission Orders & Authorization



Discharge order
from acute care.



Discharge
summary from
acute care.



Admission order
to swing bed.



Payor
authorization



Confirm attending
physician
assignment.

Required Documentation

Clinical



Such as, Swing bed history & physical, medication reconciliation, therapy evaluations (if needed), nursing assessments

Administrative

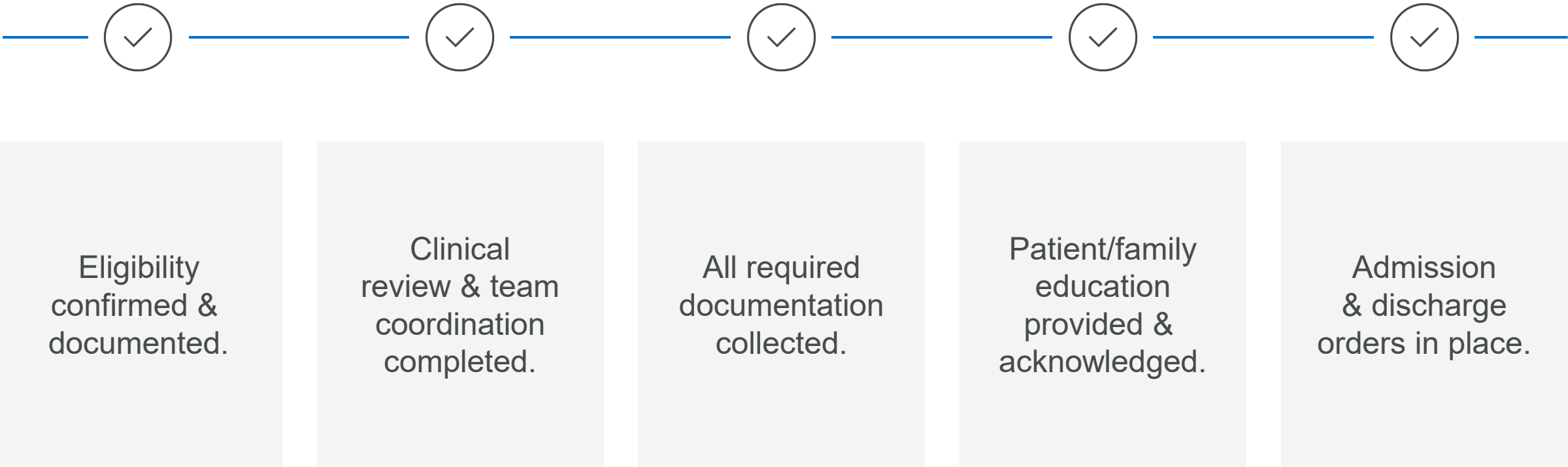


Such as, consent forms and insurance verification

If needed: Initiate SB-MDS
(Swing Bed Minimum Data Set)



Summary Checklist





Swing Bed Readiness Assessment

Integrating Readiness
With Pre-Admission
Assessment Processes



What Is a Swing Bed Readiness Assessment?



A structured evaluation to determine if a facility & patient are prepared for swing bed admission.



Focuses on clinical, operational, & administrative readiness.



Ensures alignment with CMS requirements & patient-centered care goals.

Components of Readiness Assessment

1 Clinical Readiness

Patient stability,
skilled need,
therapy availability

2 Operational Readiness

Staffing, equipment,
and facility support

3 Administrative Readiness

Documentation,
consent, insurance
verification

4 Regulatory Readiness

How Readiness Assessment Complements Pre-Admission Screening



Ensures all preadmission criteria are met before transition.



Identifies gaps in services or documentation early.



Facilitates interdisciplinary coordination.



Enhances patient safety & care continuity.

Tools & Examples for Readiness Evaluation



Swing Bed
Readiness
Checklist



Interdisciplinary
Team Review
Form



Facility
Capability
Matrix



Patient-Centered
Goals
Worksheet



SB-MDS
Initiation
Template, if
required

Case Study

PPS Hospital Swing Bed Transformation Journey 1

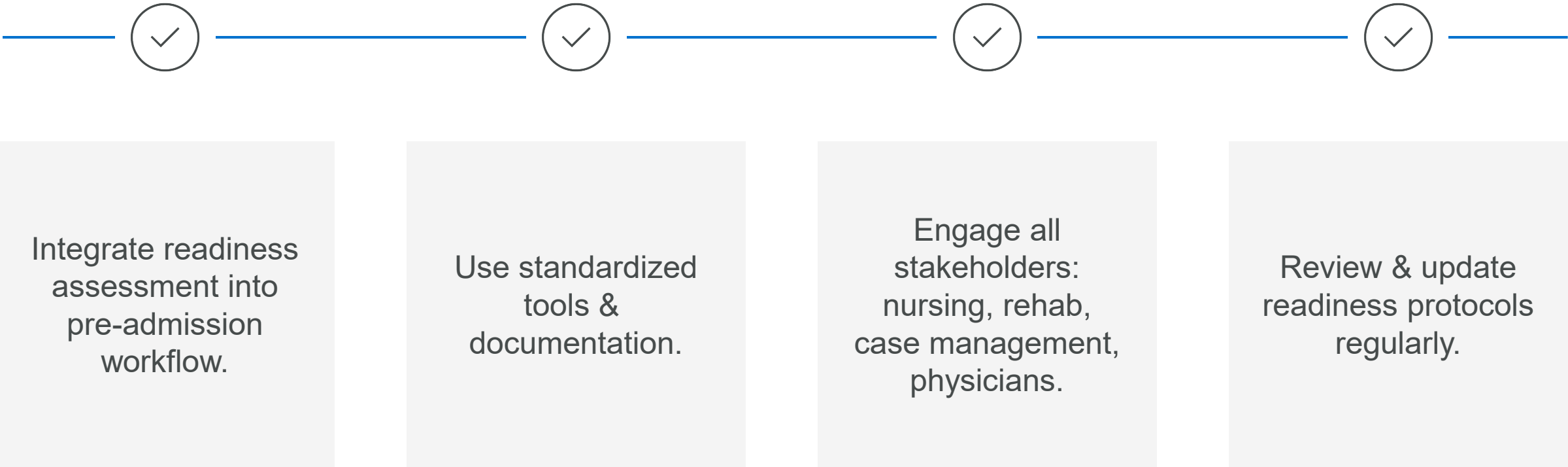
Overview: A Prospective Payment System (PPS) hospital undertook a strategic transformation to implement swing bed services, focusing on post-acute care gaps and discharge delays.

Key Readiness Actions:

- **Eligibility & Documentation:** Ensured compliance with CMS requirements including a three-day qualifying stay and skilled nursing documentation.
- **Workflow Optimization:** Developed internal checklists, trained staff, and coordinated case management for smooth transitions.
- **Strategic Value:** Swing beds helped retain patients locally, reduced readmissions, and improved continuity of care.





Summary & Best Practices




Swing Bed Pre-Admission Summary

Together, these components form a comprehensive framework that supports compliance, quality care, & smooth transitions into swing bed services.

- 

Swing Bed Pre-Admission Process
Eligibility screening, clinical review, patient education, authorization, & documentation.
- 

Pre-Admission Checklist
Ensures all required documentation, assessments, & consents are completed prior to admission.
- 

Readiness Assessment
Evaluates facility capabilities, staffing, & service availability to support swing bed care.

Next session in this series:

**Swing Bed Programs:
Documentation to Support
Sustainable Reimbursement**

September 16, 2025
11 a.m.–12 p.m. ET



Contact

Forvis Mazars

Valorie Clouse

Director

P: 260.460.4032

valorie.clouse@us.forvismazars.com

The information set forth in this presentation contains the analysis and conclusions of the author(s) based upon his/her/their research and analysis of industry information and legal authorities. Such analysis and conclusions should not be deemed opinions or conclusions by Forvis Mazars or the author(s) as to any individual situation as situations are fact-specific. The reader should perform their own analysis and form their own conclusions regarding any specific situation. Further, the author(s)' conclusions may be revised without notice with or without changes in industry information and legal authorities.

© 2025 Forvis Mazars, LLP. All rights reserved.