### Centers for Medicare & Medicaid Services, HHS

§485.701

paragraph (a) of this section is made in accordance with §413.70 of this chapter. Payment for post-hospital SNF-level of care services is made in accordance with the payment provisions in §413.114 of this chapter.

(d) *SNF* services. The CAH is substantially in compliance with the following SNF requirements contained in subpart B of part 483 of this chapter:

(1) Resident rights (\$483.10(b)(7), (c)(1), (c)(2)(iii), (c)(6), (d), (e)(2) and (4), (f)(4)(ii) and (iii), (g)(8) and (17), (g)(18) introductory text, and (h) of this chapter).

(2) Admission, transfer, and discharge rights (\$483.5 definition of transfer & discharge, \$483.15(c)(1), (c)(2), (c)(3), (c)(4), (c)(5), (c)(7), (c)(8), and (c)(9) of this chapter).

(3) Freedom from abuse, neglect and exploitation (\$483.12(a)(1), (a)(2), (a)(3)(i), (a)(3)(ii), (a)(4), (b)(1), (b)(2), (c)(1), (c)(2), (c)(3), and (c)(4) of this chapter).

(4) Social services (§483.40(d) of this chapter).

(5) Comprehensive assessment, comprehensive care plan, and discharge planning (\$483.20(b), and \$483.21(b) and (c)(2) of this chapter), except that the CAH is not required to use the resident assessment instrument (RAI) specified by the State that is required under \$483.20(b), or to comply with the requirements for frequency, scope, and number of assessments prescribed in \$413.343(b) of this chapter).

(6) Specialized rehabilitative services (§483.65 of this chapter).

(7) Dental services (\$483.55(a)(2), (3), (4), and (5) and (b) of this chapter).

(8) Nutrition (\$483.25(g)(1) and (g)(2) of this chapter).

[63 FR 26359, May 12, 1998, as amended at 64
FR 41544, July 30, 1999; 67 FR 50120, Aug. 1, 2002; 69 FR 49272, Aug. 11, 2004; 81 FR 68871, Oct. 4, 2016; 82 FR 32260, July 13, 2017; 84 FR 51828, Sept. 30, 2019]

#### §485.647 Condition of participation: psychiatric and rehabilitation distinct part units.

(a) *Conditions*. (1) If a CAH provides inpatient psychiatric services in a distinct part unit, the services furnished by the distinct part unit must comply with the hospital requirements specified in subparts A, B, C, and D of part

482 of this subchapter, the common requirements of \$412.25(a)(2) through (f) of part 412 of this chapter for hospital units excluded from the prospective payment systems, and the additional requirements of \$412.27 of part 412 of this chapter for excluded psychiatric units.

(2) If a CAH provides inpatient rehabilitation services in a distinct part unit, the services furnished by the distinct part unit must comply with the hospital requirements specified in subparts A, B, C, and D of part 482 of this subchapter, the common requirements of 412.25(a)(2) through (f) of part 412 of this chapter for hospital units excluded from the prospective payments systems, and the additional requirements of 412.29 and 412.30 of part 412 of this chapter related specifically to rehabilitation units.

(b) *Eligibility requirements.* (1) To be eligible to receive Medicare payments for psychiatric or rehabilitation services as a distinct part unit, the facility provides no more than 10 beds in the distinct part unit.

(2) The beds in the distinct part are excluded from the 25 inpatient-bed count limit specified in §485.620(a).

(3) The average annual 96-hour length of stay requirement specified under §485.620(b) does not apply to the 10 beds in the distinct part units specified in paragraph (b)(1) of this section, and admissions and days of inpatient care in the distinct part units are not taken into account in determining the CAH's compliance with the limits on the number of beds and length of stay in §485.620.

[69 FR 49272, Aug. 11, 2004]

# Subpart G [Reserved]

## Subpart H—Conditions of Participation for Clinics, Rehabilitation Agencies, and Public Health Agencies as Providers of Outpatient Physical Therapy and Speech-Language Pathology Services

# §485.701 Basis and scope.

This subpart implements section 1861(p)(4) of the Act, which—