A facility for skilled nursing shall not, as a condition of admitting or providing for the expedited admission of a patient to, or allowing a patient to remain in, the facility:

1. Require a patient to waive his rights to benefits under any state or federal program that is available to assist patients in the payment of services provided by the facility, including, without limitation, Medicaid and Medicare.

2. Require a patient to provide a written or oral confirmation that he is not eligible for or will not apply for benefits under such a program.

3. Charge, solicit, accept or receive any gift, money, contribution or other consideration on behalf of a patient who is eligible for benefits under such a program in addition to any amount otherwise required to be paid to the facility under the program. The provisions of this subsection do not prohibit a facility from:

   (a) Charging such a patient for an item or service not covered under the program if:

      (1) The item or service is requested by the patient;

      (2) The facility does not require the patient to request the item or service as a condition of admission to or remaining in the facility; and

      (3) The facility informs the patient that there will be a charge for the item or service and the amount of the charge.

   (b) Soliciting, accepting or receiving a charitable, religious or philanthropic contribution from an organization or a person who is unrelated to the patient, but only to the extent that the contribution is not a condition of admitting or providing for the expedited admission of the patient to, or allowing the patient to remain in, the facility.

4. Require a third person to guarantee the payment of fees charged by the facility for services provided to the patient. The provisions of this subsection do not prohibit the facility from requiring a person who has legal control over the income or other resources of the patient to enter into a contract, without incurring personal liability, for the payment of fees charged by the facility for services provided to the patient.

1. A facility for skilled nursing may transfer or discharge a patient from the facility only if:
(a) The facility can no longer provide for the needs of the patient and the transfer or discharge is necessary for the patient’s welfare;

(b) The health of the patient has improved sufficiently so that the patient no longer requires the services provided by the facility;

(c) The health or safety of other persons in the facility is endangered if the patient remains in the facility;

(d) The charges for services provided to the patient by the facility have not been paid after the facility has given notice of those charges; or

(e) The facility ceases to operate.

2. Before a facility for skilled nursing may transfer or discharge a patient from the facility, the facility shall:

(a) Record the reasons for the transfer or discharge in the medical records of the patient. If a patient is transferred or discharged under the circumstances described in:

(1) Paragraph (a) or (b) of subsection 1, the reasons for the transfer or discharge must be recorded by the patient’s physician.

(2) Paragraph (c) of subsection 1, the reasons for the transfer or discharge must be recorded by any physician.

(b) Give notice of the transfer or discharge to the patient and, if known, to the legal representative of the patient or a member of the patient’s family. The notice must:

(1) Be in writing;

(2) Be in a language that is understood by the patient and his legal representative or a member of his family;

(3) Except as otherwise provided in subsection 3, be given at least 30 days before the effective date of the transfer or discharge;

(4) Include the reasons for the transfer or discharge;

(5) Include the effective date of the transfer or discharge;

(6) Specify the location to which the patient will be transferred or discharged;

(7) Include a statement that the patient has a right to appeal the transfer or discharge;

(8) Include the name, address and telephone number of the advocates for residents of facilities for long-term care appointed pursuant to chapter 427A of NRS; and
(9) If the patient is developmentally disabled or mentally ill, include the name, address and telephone number of persons who advocate for and are responsible for the protection of such persons.

3. The notice required by paragraph (b) of subsection 2 may be given less than 30 days before the effective date of the transfer or discharge if:

(a) The health or safety of other persons in the facility is endangered if the patient remains in the facility;

(b) The health of the patient has improved sufficiently to allow a more immediate transfer or discharge of the patient;

(c) The medical needs of the patient require a more immediate transfer or discharge; or

(d) The patient has not resided in the facility for at least 30 days.

4. Upon admission of a patient to a facility for skilled nursing and at the time the facility transfers the patient for hospitalization or therapeutic leave, the facility shall provide to the patient and to the legal representative of the patient or to a member of the patient’s family, in writing:

(a) The time within which the patient may resume his residency in the facility without waiting for readmission; and

(b) The policy of the facility for readmitting a patient whose hospitalization or therapeutic leave exceeds the time within which he may resume his residency in the facility without waiting for readmission upon the first availability of a bed in a semiprivate room.

1. A facility for skilled nursing shall prepare a patient for his transfer or discharge in such a manner as to ensure the safe and orderly transfer or discharge of the patient from the facility.

2. As used in this section, “transfer” or “discharge” means the movement of a patient to a location outside of a facility for skilled nursing, whether or not that location is within the same physical area of the facility. The term does not include the movement of a patient to a bed located within the facility for skilled nursing.

**NAC 449.74431 SUMMARY OF DISCHARGE. (NRS 449.037)**

1. A facility for skilled nursing shall prepare a summary of discharge for each patient discharged from the facility.

2. A summary of discharge must include:

(a) A summary of the pertinent information relating to the patient’s stay at the facility;
(b) A final summary of the patient’s physical, mental and psychosocial health at the time of discharge, including, without limitation, the information required to be included in a comprehensive assessment of the patient pursuant to subsection 2 of NAC 449.74433; and

(c) A plan of care for the patient after his discharge that assists the patient in adjusting to his new living environment. The plan of care must be developed with the participation of the patient and members of his family.

3. A facility for skilled nursing may release a summary of discharge to persons and under the circumstances approved by the patient who is the subject of the summary or his legal representative.

NAC 449.74453 NOTICE TO PATIENTS OF PROGRAMS AVAILABLE FOR ASSISTANCE IN PAYMENT OF SERVICES. (NRS 449.037)

A facility for skilled nursing shall:

1. Provide to applicants for admission to the facility and to the patients in the facility oral and written information concerning state and federal programs that are available to assist patients in the payment of services provided by the facility, including, without limitation, Medicaid and Medicare; and

2. Display in a prominent place within the facility the written information provided pursuant to subsection 1.

NAC 449.74455 DISCRIMINATION PROHIBITED. (NRS 449.037)

...2. A facility for skilled nursing shall adopt and maintain policies and procedures for the transfer and discharge of, and the provision of services to, patients in the facility which do not discriminate against a patient based on the source of payment for the services provided.