2014 Hospital Admission Criteria

Presented by
WPS Medicare Provider Outreach and Education

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Disclaimer

This program is presented for informational purposes only.

Current Medicare regulations will always prevail.
Agenda

- 2-midnight benchmark and presumption
- Admission order
- Physician certification
2-Midnight Benchmark

- Status considered payment policy
  - Not clinical level of care
- Clarification of prior 24 hour benchmark
- Intent is to provide consistent application of Part A benefits
  - Time, not level of hospital services, used as benchmark
Presumption Met When

• Physician expects the beneficiary to require hospital care that crosses 2 midnights
  – Based on medical factors
  – Physician judgment
  – Documented in medical record

• Admits the beneficiary based upon that expectation
  – Formal admission order required for Part A payment
Time Included in Benchmark

- Starts when beneficiary begins to receive hospital services
  - Including outpatient services
    - Observation
    - Emergency department
    - Operating room

- Excludes
  - Pre-hospital services (simple triage)
  - Ambulance
Important Note

- As an outpatient stay approaches the second midnight, the decision to admit becomes easier

The order to admit should be written prior to the second midnight if the beneficiary still requires hospital care of any level.
Shorter Than Expected Stays

• Unforeseen circumstances
  – Death, transfer, against medical advice (AMA), unexpected recovery
  – Clearly document in medical record

Do **not** convert to an outpatient stay for billing purposes
Admission Order

- Part of required certification
- Furnished at or before the time of the inpatient admission
Retroactive Orders

Are never accepted
Best Practice

Use the word “inpatient”

- Assumed inpatient
  - “Admit to Dr. Smith”
  - “Admit to 5th floor”

- Assumed outpatient
  - “Admit to Observation”
  - “Admit to Recovery”
  - “Admit to Day Surgery”

Make it clear from the start!
Who Can Admit?

- Qualified physician or other practitioner
  - Licensed by the state to admit
  - Granted privileges by the hospital
  - Knowledgeable about the patient
- Includes non-physician practitioners
Knowledgeable About the Patient

- Hospitalist
- Admitting physician of record ("attending")
- Beneficiary’s primary care practitioner
- Surgeon responsible for a major surgical procedure
- Emergency or clinic practitioner at beneficiary’s point of inpatient admission
Other Knowledgeable Provider

- Physician “on call” for one of the prior
- Another provider actively treating patient at time of admission

Does **not** include utilization review committee physician unless actively treating patient at time of admission
Verbal/Telephone Orders

• Must identify the ordering physician/practitioner
• Authenticated by ordering physician/practitioner
  – Or another practitioner with admitting privileges
  – Prior to discharge or sooner if State requires
Physician Certification

• Required for Part A payment
• Content of certification
  – Reason for admission
  – Estimated time in hospital
  – Plans for post-hospital care, if appropriate
  – Contain physician signature
• Additional component for critical access hospitals
  – Reasonable expectation of discharge within 96 hours
Timing of Certification

- Timing of certification
  - Begins with the order for admission
  - Completed, signed, dated and documented in the medical record prior to discharge
Who Can Sign?

• MD or DO

• Dentist
  – In circumstances specified in 42 CFR 424.13(d)

• Doctor of podiatric medicine
  – If consistent with state law

• UR committee physician
  – For non-physician, non-dentist, admitting practitioner
“Probe and Educate”

- Patient status reviews for hospital claims
- Includes dates of admission from October 1, 2013 – March 31, 2014
- Excludes claims from
  - Critical Access Hospital (CAH)
  - Inpatient Rehabilitation Facility (IRF)
- Current reviews not affected
  - Coding
  - Procedure medical necessity
  - Admissions prior to 10/01/13
References

• Fiscal Year (FY) 2014 Inpatient Prospective Payment System (IPPS) Final Rule
References

- **CMS website**
  - **CMS Inpatient Hospital Review**
  - **Hospital Inpatient Admission Order and Certification**