


Name of Policy: Patient Status Assignment Policy Number: 3364-100-50-43 Approving Officer: Chief Executive Officer, Chief of Staff Responsible Agent: Administrative Director, Outcome Management, Chief Medical Officer Scope: University of Toledo Medical Center		 Effective date: Original effective date: 3/5/2009	
Key words: Patient Status, Assignment, Medical Necessity, Documentation Review, Resource Utilization Committee			
<input type="checkbox"/>	New policy proposal	<input type="checkbox"/>	Minor/technical revision of existing policy
<input checked="" type="checkbox"/>	Major revision of existing policy	<input type="checkbox"/>	Reaffirmation of existing policy

(A) Policy Statement

Resource Utilization Coordinators will determine the appropriate patient status dependent upon medical necessity, after review of provider documentation, provider orders, physician's/-providers plan of care, Interqual using medical necessity criteria, and the "Medicare Inpatient Only" list. The Resource Utilization Coordinators will be acting under the authority of ~~the Resource~~ the Resource Utilization Committee.

(B) Purpose of Policy

~~Insure that accurate documentation reflects the hospital care provided. The purpose of Patient Status Assignment is to determine the appropriateness of patient status based on medical necessity.~~

(C) Procedure

1. Medical Records will be ~~reviewed based~~ reviewed based on Medical Necessity, after review of provider documentation, provider orders, providers physician's plan of care, Interqual medical necessity criteria, and the Medicare Inpatient Only list, for appropriate status determination.
2. Medical records will be reviewed by the Resource Utilization Coordinators (RUCs) according to the above criteria. If the RUC determines that a patient admission/order status is incorrect based on this medical necessity criteria, ~~the RUC will call and~~ discuss this determination with the provider/physician physician. If the provider/physician is in agreement, the provider/physician will change the order to the appropriate admission status in the electronic medical record/EMR Care Organizer/HEO.
3. If the provider/physician disagrees with the status change, the RUC will refer the case to the external contracted vendor/Physician Advisor/Executive Health Resources.
 - a. The external Physician Advisor/~~Executive Health Resources~~ will review the medical record and confer with the provider/attending physician. If disagreement continues then the case will be

referred to ~~the Resource~~ the Resource Utilization Committee designees (Chief Medical Officer and/or Internal Physician Advisor).

- b. ~~The above designees~~ A physician on the Resource Utilization Committee will review the medical record and confer with the attending provider/physician.
 - c. The Physician on the Resource Utilization Committee will then make a final decision regarding the patient status. The attending provider/physician and the Resource Utilization Coordinator/RUC will be notified of this final decision and the provider/physician will update the patient status in the EMR.
4. When a patient's medical record ~~has is~~ not been reviewed by a Resource Utilization Coordinator within ~~3~~ three business days and the patient has discharged, the original Physician order for status will remain until a retrospective review occurs. ~~—~~ The Resource Utilization Coordinators will apply the above criteria for all government payors ~~in regards to~~ in regard to status changes after discharge. The request for status change after discharge, when appropriate according to these guidelines, will be communicated with in the electronic medical record ~~the appeals department~~ for the correction to be made by the patient financial services department.
 5. If the patient's medical record has not been reviewed by a Resource Utilization Coordinator within three business days and hospitalization continues, the original Physician order for status will remain until review occurs. Patient Status change for Medicare beneficiaries/Medicaid patients to from Inpatient ~~/Observation~~ to Observation admission/status will be effective at the time the order is entered into the electronic medical record ~~Care Organizer/HEO~~. The Resource Utilization Coordinator will update the patient status and reflect the change in date and time in the electronic medical record and notify the patient of change to observation when applicable in accordance with CMS guidelines. ~~The request to change the status to correct admission date and time will be communicated with bed placement/appeals department for correction to be made based upon the payors guidelines.~~
 6. If admission to the hospital or continued stay is determined to be not medically necessary ~~unnecessary~~, the RUC will inform the provider/physician. ~~—~~ If the provider/physician disagrees with this determination, then the same process for disagreement with patient status change will occur. ~~—~~ If the Physician on the Resource Utilization Committee's final determination is that the stay is not medically necessary, the attending provider/physician, patient, and facility administrator ~~and the government agency~~ will be notified. ~~receive written notification no later than 2 days after the final determination.~~

<p>Approved by:</p> <hr/> <p>Daniel Barbee Chief Executive Officer</p> <hr/> <p>Date</p> <hr/> <p>Puneet Sindhvani, MD Chief of Staff</p> <hr/> <p>Date</p> <p><i>Review/Revision Completed by: Administrative Director, Outcome Management, Chief Medical Officer</i></p>	<p>Policies Superseded by This Policy:</p> <ul style="list-style-type: none">• <i>None</i> <p>Initial effective date: 3/25/2009</p> <p>Review/Revision Date:</p> <p>3/24/2010 3/26/2013 7/1/2016 4/1/2020 6/2023</p> <p>Next review date:</p>
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