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| Name of Policy: <u>Patient Status Assignment</u> Policy Number: 3364-100-50-43 Department: Hospital Administration Approving Officer: Chief Executive Officer Chief of Staff Responsible Agent: Director Outcome Management Scope: The University of Toledo Medical Center and its Medical Staff |  Effective Date: 04/15/2020 Initial Effective Date: 3/25/2009 |
| <input type="checkbox"/> New policy proposal <input type="checkbox"/> Major revision of existing policy | <input type="checkbox"/> Minor/technical revision of existing policy <input checked="" type="checkbox"/> Reaffirmation of existing policy |

(A) Policy Statement

Resource Utilization Coordinators will determine the appropriate patient status dependent upon medical necessity, physician’s plan of care, Interqual criteria, and the “Medicare Inpatient Only” list. The Resource Utilization Coordinators will be acting under the authority of the Resource Utilization Committee.

(B) Purpose of Policy

Insure that accurate documentation reflects the hospital care provided.

(C) Procedure

1. Medical Records will be reviewed based on Medical Necessity, physician’s plan of care, Interqual 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 criteria, the RUC will call and discuss with the physician. If the physician is in agreement, the physician will change the order to the appropriate admission status in Care Organizer/HEO.
3. If the physician disagrees with the status change, the RUC will refer the case to the Physician Advisor/Executive Health Resources.
 - a. The Physician Advisor/Executive Health Resources will review the medical record and confer with the attending physician. If disagreement continues then the case will be referred to the Resource Utilization Committee.
 - b. A physician on the Resource Utilization Committee will review the medical record and confer with the attending physician.
 - c. The Physician on the Resource Utilization Committee will then make a decision. The attending physician and the Resource Utilization Coordinator will be notified of this final decision.
4. When a patient’s medical record is not reviewed by a Resource Utilization Coordinator within 3 business days and 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 status changes after discharge. The request for status change after discharge, when appropriate according to these guidelines, will be communicated with the appeals department for the correction to be made.
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. Status change for Medicare/Medicaid patients to Inpatient/Observation admission will be effective at the time the order is entered into Care Organizer/HEO. 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 unnecessary, the RUC will inform the physician. If the physician disagrees with this determination, then the same process for disagreement with patient status change will

occur. If the Resource Utilization Committee’s final determination is that the stay is not medically necessary, the attending physician, patient, facility administrator and the government agency will receive written notification no later than 2 days after the final determination.

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| <p>Approved by:</p> <p><u>/s/</u> _____ <u>04/15/2020</u> Daniel Barbee, MBA, BSN, RN, FACHE Chief Executive Officer Date</p> <p><u>/s/</u> _____ <u>04/15/2020</u> Samer Khouri, M.D. Chief of Staff Date</p> <p><u>/s/</u> _____ <u>04/15/2020</u> Angela Ackerman Administrative Director, Outcome Management Date</p> <p><i>Review/Revision Completed By:</i> <i>Outcome Management</i> <i>HAS</i> <i>Chief of Staff</i></p> | <p>Review/Revision Date: 3/24/2010 3/26/2013 7/1/2016 4/1/2020</p> <hr/> <p>Next Review Date: 4/1/2023</p> |
| <p>Policies Superseded by This Policy: New</p> | |