TALKING POINTS
CAH Physician Certification Requirements

Background
The Centers for Medicare & Medicaid Services (CMS) finalized policies related to inpatient admission and review criteria, including physician certification and admission order requirements, in the fiscal year 2014 hospital inpatient prospective payment system final rule. On Sept. 5, CMS issued guidance further clarifying physician certification and order requirements for inpatient admissions. These AHA talking points address the requirement set forth in the guidance requiring physicians at critical access hospitals (CAHs) to certify that a beneficiary may reasonably be expected to be discharged or transferred to a hospital within 96 hours after admission to the CAH.

Talking Points
• CMS’s guidance specifically sets for the following condition of payment for inpatient CAH services: The physician must certify that the beneficiary may reasonably be expected to be discharged or transferred to a hospital within 96 hours after admission to the CAH.

• This condition of payment also is set forth in 42 CFR 424.15(a), a provision that was enacted in October 1997. Therefore, this is not a new requirement for CAHs.

• There is some confusion between this condition of payment and the 96-hour annual average length of stay condition of participation for CAHs.
  o The condition of participation related to length of stay for CAHs appears in Section 42 CFR 485.620 and states: The CAH provides acute inpatient care for a period that does not exceed, on an annual average basis, 96 hours per patient. That is, CAHs must maintain an annual average length of stay of 96 hours in order to maintain CAH certification.

  o The condition of payment related to length of stay for CAHs appears in 42 CFR 424.15(a) and states: Medicare Part A pays for inpatient CAH services only if a physician certifies that the individual may reasonably be expected to be discharged or transferred to a hospital within 96 hours after admission to the CAH. In other words, CAHs must meet this condition in order to be paid for a specific claim under Medicare Part A.

  o The conditions of payment and conditions of participation must then be read together. For example, if a physician has certified that an individual is reasonably expected to be discharged or transferred within 96 hours and the individual ends up staying longer, as long as the statutory annual average 96-hour length of stay requirement is met, the CAH will receive Medicare Part A reimbursement.

• CAHs may satisfy this condition of payment by including a physician certification form or statement in the medical record. If physician certification forms or statements are not included in the medical record, CMS’s guidance also specifies that this condition of payment may be met by either physician notes or by actual discharge within 96 hours.

• For further questions, contact Priya Bathija, senior associate director, at (202) 626-2678 or pbathija@aha.org

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