

PROCEDURE

Procedure Title: Inpatient Psychiatric Facility Medicare Interrupted Stay	No: COMP-RCC 4.32.PR.02
	Page: 1 of 2
	Effective Date: 09/22/2021
	Previous Versions: 3/15/17, 10/12/11, 7/1/10
Policy Title: Medicare Interrupted Stay in IPPS Exempt Units	Approved By: Debra Lowrance
	Approval Date: 09/22/2021

I. Procedure:

A. Pre-Interruption

1. The physician must be the one to determine that the patient will transfer off the unit.
2. At the time of the transfer from the unit:
 - a. The nursing staff of the IPF will follow routine discharge procedures.
 - b. The facility creates a new account number for the acute care admission.

B. Post-Interruption

1. If the patient transfers back to the IPF unit by midnight of the third calendar day:
 - a. The facility will discharge and finalize the acute care account by normal procedures.
 - b. The Program Director identifies the readmission as an Interrupted Stay and communicates this information to HIM, the Business Office, the physician, and the clinical staff.
 - (i) A new account number identifies the patients' return stay.
 - (ii) The original medical record clinical data of the IPF stay for the patient is used upon his/her return to the IRF.
 - (iii) The IPF must establish a re-assessment procedure for the physician and clinical staff to ensure adjustment of the Plan of Care as appropriate.
 - (iv) Clinical staff is responsible for a single discharge summary at the time of the final discharge.
 - (v) The acute care record does not become part of the IPF record.
2. If the patient does not transfer back to the unit by the third midnight:
 - a. On the fourth day, the patient is an IPF discharge.
 - b. Clinical staff complete discharge summaries; the chart is broken down by unit staff and sent to HIM for processing and coding.
 - c. Billing staff submit the claim.

PROCEDURE

Procedure Title: Inpatient Psychiatric Facility Medicare Interrupted Stay	No: COMP-RCC 4.32.PR.02
	Page: 2 of 2
	Effective Date: 09/22/2021
	Previous Versions: 3/15/17, 10/12/11, 7/1/10
Policy Title: Medicare Interrupted Stay in IPPS Exempt Units	Approved By: Debra Lowrance
	Approval Date: 09/22/2021

3. If the patient transfers to or from a different IPF after the interruption:
 - a. The IPF staff admit and discharge the patient through normal procedures.
 - b. The UB-04 will reflect a standard discharge. The Medicare Administrative Contractor will identify the Interrupted Stay through the Medicare Common Working File and will adjust reimbursement.

C. Claim Management

The Business Office is responsible for opening a new account for the re-admitted patient and then merging the two accounts into a single Patient Account at the end of the stay.

1. The Business Office enters the dates of the interrupted stay in the account under the Occurrence Span Code, '74' with 'From' and 'Through' dates of the interruption. The day of discharge from the IRF is the 'From' date and the last day the patient is not in the IPF at midnight is the 'Through' date.
2. Billing staff ensure the UB-04 reports accommodation revenue code 18X (leave of absence) and the number of leave days. Revenue code 018X should reflect the total number of days for all occurrence span code 74 entries. No charges are added to this charge line.
3. Billing staff transmits the UB-04 per CMS protocol.

II. References:

Medicare Claims Processing Manual 190.7.1

Medicare Claims Processing Manual 190.10.7