

DEPARTMENT OF HEALTH AND HUMAN SERVICES
Centers for Medicare & Medicaid Services



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Clarification of Inpatient Psychiatric Facilities (IPF) Requirements for Certification, Recertification and Delayed/Lapsed Certification and Recertification

Provider Types Affected

This MLN Matters® Article is intended for physicians and other specified providers submitting claims to Medicare Administrative Contractors (MACs) to certify and recertify the medical necessity of inpatient psychiatric services provided to Medicare beneficiaries.

What You Need to Know

A physician or other specified providers need to certify the medical necessity of inpatient services. This is required at admission, and if the service is needed for an extended period of time, a recertification is necessary. CR9522 clarifies that your MAC will cease denials of Inpatient Psychiatric Facility (IPF) providers that do not use “the statement” that “the patient continues to need, on a daily basis, active treatment furnished directly by or requiring the supervision of inpatient psychiatric facility personnel” for recertification when documentation is present that validates (without using any particular words) that the patient continues to need care.

Background

Currently, the IPF Prospective Payment System (PPS) requires facilities to provide “the statement” for recertification. As a result, payments to providers whose documentation validates all the necessary requirements to continue care were being denied because they did not use “the statement.”

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CR9522 clarifies physician certification, recertification and delayed/lapsed certification and recertification with respect to IPF services in the “Medicare General Information, Eligibility and Entitlement Manual,” Chapter 4, Section 10.9. and in the “Medicare Benefit Policy Manual,” Chapter 2, Section 30.2.1.

There is also a difference in the content of the certification and recertification. In certification the physician is required to document that the IPF admission was medically necessary for either: (1) treatment which could reasonably be expected to improve the patient's condition, or (2) diagnostic study.

Key Points of CR9522

- Your MAC will use the beneficiary’s IPF medical record, if the statement “that the patient continues to need, on a daily basis, active treatment furnished directly by or requiring the supervision of inpatient psychiatric facility personnel” is not present in the physician's recertification documentation, to determine if all the required elements for recertification were met.
- Your MAC will allow providers to adopt any method that permits verification of all the elements IPFs require to continue treatment. No specific procedures or forms are required for certification and recertification. The recertification may be entered on provider generated forms, in progress notes, or in the records (relating to the stay in question) and must be signed by a physician.
- Your MAC will deny IPF claims that do not have timely certifications and recertifications. However, delayed certifications and recertifications will be honored where, for instance, there has been an oversight or lapse, and there is a legitimate reason for the delay. Denial of payment for lack of the required certification and recertification is considered a technical denial, which means a statutory requirement has not been met.
- MACs will allow the reopening of technical denial decisions (initiated by the provider or contractor).
- MACs will reverse any delayed/lapsed certification or recertification denials where the provider later produced a legitimate reason for the delay.
- MACs will review provider explanations/reasons for delayed certification and recertification. The submission of documents must include an explanation for the delay and any medical or other evidence the IPF considers relevant for purposes of explaining the delay.
- MACs will allow the IPF to determine the format of delayed certification and recertification statements, and the method by which they are obtained. A delayed certification may be included with one or more recertifications on a single signed statement. Separate signed statements for each delayed certification and recertification are not required, as they would be if timely certification and recertification had been completed. For all IPF services, a delayed certification may not extend past discharge. An IPF certification or recertification statement may only be signed by a physician.

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Additional Information

The official instruction, CR9522, was issued to your MAC regarding this change via two transmittals. The first updates the “Medicare General Information, Eligibility and Entitlement Manual” and it is available at <https://www.cms.gov/Regulations-and-Guidance/Guidance/Transmittals/Downloads/R98GI.pdf>. The second updates the “Medicare Benefit Policy Manual” and it is available at <https://www.cms.gov/Regulations-and-Guidance/Guidance/Transmittals/Downloads/R223BP.pdf>. The revised manual section is attached to each transmittal.

If you have any questions, please contact your MAC at their toll-free number. That number is available at <http://www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNMattersArticles/index.html> under - How Does It Work.

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