
Program Memorandum Intermediaries

Department of Health and
Human Services (DHHS)
HEALTH CARE FINANCING
ADMINISTRATION (HCFA)

Transmittal A-01-29

Date: FEBRUARY 28, 2001

CHANGE REQUEST 1454

SUBJECT: Medical Review of Certification and Re-certifications of Residents in Skilled Nursing Facilities (SNFs)

GENERAL INFORMATION

This Program Memorandum (PM) clarifies existing law and regulations regarding certification and re-certification requirements for SNFs. In addition, it provides reopening instructions for SNF claims that when medically reviewed, were denied solely for failure to be supported by a separate certification or re-certification form.

BACKGROUND

The Medicare conditions of payment require a physician certification and (when specified) re-certification for SNF services. This requirement is explicitly stated in §1814(a)(2) of the Social Security Act. 42 CFR 424 Subpart B details the required contents of the certification and re-certifications and specifies that "no specific procedures or forms are required for certification and re-certification statements," and that "the provider may adopt any method that permits verification. The certification and re-certification statements may be entered on forms, notes, or records that the appropriate individual signs, or on a special separate form." Further, 42 CFR § 424.11(c) states, "If that information is contained in other provider records, such as physicians' progress notes, it need not be repeated. It will suffice for the statement to indicate where the information is to be found." Recent decisions by administrative law judges, which HCFA believes are fully consistent with law and regulations, reinforce the need for fiscal intermediaries to consider documentation in the beneficiary's medical record beyond a discrete certification or re-certification form to determine if the required elements for certification are present.

INSTRUCTIONS

1. Claim denials should be made for failure to comply with the certification or re-certification requirements as described in 42 CFR 424 Subpart B. Claim denials may not be made for failure to use a certification form or particular format.
2. Upon request from a SNF, reopen a claim that was denied within the last 4 years, based on lack of a separate form for certification or re-certification. It is not necessary to reopen denied claims that were previously reopened for this reason. The medical review unit will be responsible for the review and adjudication of the reopened claim.
3. It is not necessary to reopen denied claims unless requested by a SNF.
4. When reviewing the reopened claim, limit the review to compliance with certification or re-certification requirements unless there is good cause for more extensive review (e.g., evidence of fraud). In this case, make a medical review determination based upon the available medical documentation and adjust the claim as appropriate.

The effective date for this PM is March 1, 2001.

The implementation date for this PM is April 2, 2001.

These instructions should be implemented within your current operating budget. This workload will satisfy the BPR workload requirements and will therefore be funded under this year's negotiated budget.

This PM may be discarded after April 2, 2002.

If you have any questions, contact Gina Perantoni at (410) 786-3219 or Michele Sanders at (410) 786-0808.