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**Facility Specific Addendum Attached - Review All of Policy and Addendum Pages**  
 (Check if State Specific and/or Facility Specific Policy Addendum is attached)

**PURPOSE**

This policy establishes guidelines for Case Managers to review each admission to ensure that the patient’s needs and treatment plan are medically necessary and appropriate for the LTAC setting.

**POLICY**

The policy of Kindred Hospital is to ensure the following:

1. Case Managers will complete the initial (admission) review using adopted decision support criteria for appropriateness of LTAC admission and initiation of discharge planning.
  - ✚ H-ML 09-004 CORE: Decision Support Criteria Adoption
  
2. An initial admission review will be conducted within 2 business days of admission, 1 business day for direct admission.
  
3. Within (2) business days of admission the Kindred Case Manager will perform an Admission Review. All of the following components comprise of the initial (admission) review
  - a. Initial assessment of patient’s needs and treatment plan.
  - b. Appropriateness of level of care and medical necessity.
  - c. Evaluation of interdisciplinary treatment plan and barrier to care delivery
  - d. Anticipated discharge plan and needs
  - e. Anticipated completion of care date
  - f. Case Managers review the working Diagnosis Related Grouping (DRG) and expected Length of Stay (LOS) using Geometric Mean Length of Stay (GMLOS)
    - i. Contact attending physician as appropriate with pertinent queries to clarify documentation.
    - ii. Communicate pertinent documentation to coder.
  
4. Document the review by the following steps:
  - a. Complete admission review, document according to current screening criteria guidelines in use
    - ✚ H-ML 09-004 CORE: Decision Support Criteria Adoption
  - b. Document in the medical record discharge assessment and anticipated discharge plan.
  - c. In the event of downtime, the Downtime Admission Review Worksheet will be completed and placed in the CBO (Virtual) Patient Financial Folder. This is not a permanent part of the medical record and will be stored in the Case Management Concurrent Review folder.
    - ✚ H-ML 09-014 A CORE: Downtime Admission Review Worksheet
  
5. If a review fails screening criteria, then the following steps will be taken:
  - a. If the CM determines medical necessity screens are not met, the CM will contact the attending physician for additional information.
  - b. If medical necessity screens are still not met with the additional information, the case will be referred for Secondary Review Process, Non-Physician or Physician.
    - ✚ H-ML 09-010 CORE: Physician Advisor Review

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6. If a case is referred to Physician Advisor the following steps will occur:
  - a. Medical Director will confer with attending or examine patient and medical records.
  - b. Medical Director will make determination within 12 hours.
  - c. If Medical Director determines medical necessity, then continue review process.
  - d. If Medical Director denies medical necessity and physician concurs, then a discharge order will be obtained.
  - e. If Medical Director denies medical necessity and physician disagrees, then QIO HR (hospital requested) review with HINN process will be initiated.

**DEFINITIONS**

H-ML 09-014 A CORE: Downtime Admission Review Worksheet: Downtime form used to document Admission Review completion.

**PROCEDURE**

Not applicable

