

Rule No. 560-X-5-.10. Inpatient Utilization Review

- (1) The determination of the level of care will be made by a licensed nurse of the hospital staff.
- (2) Five percent of all admissions and concurrent stay charts will be retrospectively reviewed by the Medicaid Agency or designee on a monthly basis.
- (3) For an individual who applies for Medicaid while in the facility, a Psychiatric Admission form must be signed by the attending physician at the time application for Medicaid is made.
- (4) The following information shall be included on the Psychiatric Admission Form:
 - (a) Recipient information:
 - 1. admitting diagnosis;
 - 2. events leading to hospitalization;
 - 3. history of psychiatric treatment;
 - 4. current medications;
 - 5. physician orders;
 - 6. presenting signs and symptoms.
 - (b) Events leading to present hospitalization
 - ~~(c) Diagnosis (within range 290-316)~~
 - (d) History and physical
 - (e) Mental and physical capacity
 - ~~(f)~~ Summary of present medical findings including prognosis
 - ~~(g)~~ Plan of care.
- (5) Medicaid's Psychiatric Criteria for Age 65 or Over will be utilized in reviewing whether the admission and continued stay were appropriately billed.

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Statutory Authority: 42 C.F.R. Section 456.171.

History: Rule effective October 12, 1995. The effective date of this amendment is November 10, 1997. **Amended:** Filed July 20, 2012; effective October 16, 2012. **Amended:** Filed September 20, 2013.