Harmony Healthcare International (HHI)

Physician Certifications and Recertifications for Medicare A Coverage

Facility Name

March 3, 2021



Physician Certifications and Recertifications For Medicare A Coverage Policy & Procedure

Medicare A Coverage	
Department: Nursing	Submitted By: HHI
Approval Date: March 1, 2021	Page Number: 1 of 2
Effective Date: March 1, 2021	Revised Date: 3/1/2021

Policy Statement

It is the policy of this facility to obtain timely and accurate physician certifications and recertifications for patients receiving skilled Medicare Part A services.

Policy interpretation and implementation

Initial Physician certification by the physician will be obtained at the time of admission or as soon as reasonable and practicable.

It is the responsibility of the Unit Manager (or other designated staff member) to ensure that the certification is completed timely and accurately and is signed by the physician. Certification forms should be checked by the Unit Manager for completeness.

The first recertification will be completed by Day 14 of the Medicare skilled stay. Subsequent recertifications will be completed at least every 30 days after the first recertification.

Certification and recertification of the Medicare covered stay may be signed by:

- The physician responsible for the patient or, with his/her authorization, by another physician on staff, or a physician who is available in an emergency and has knowledge of the patient's case; or
- A physician extender, such as a nurse practitioner, a clinical nurse specialist, or a physician assistant, who does not have a direct or indirect employment relationship with the facility, but who is working in collaboration with a physician.

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To qualify for Medicare, Part A coverage in the facility, the content of the initial certification for **Medicare A coverage** will be consistent with the following:

- 1. The patient requires skilled care provided by a professional on a daily basis furnished directly by or requiring the supervision of skilled nursing personnel) or other skilled rehabilitation services that, as a practical matter, can only be provided in an SNF or a swing-bed hospital on an inpatient basis, and the SNF care is or was needed for a condition for which the individual received inpatient care in a participating hospital or a qualified hospital, or for a new condition that arose while the individual was receiving care in the SNF or swing-bed hospital for a condition for which he or she received inpatient care in a participating or qualified hospital; or
- 2. The individual has been correctly assigned one of the case-mix classifiers that CMS designates as representing the required level of care.

To continue to qualify for Medicare Part A after the initial certification, the recertifications will contain:

- 1. The reasons for the continued need for post-hospital SNF care.
- 2. The estimated time the individual will need to remain in the SNF.
- 3. Plans for home care, if any; and
- 4. If appropriate, the fact that continued services are needed for a condition that arose after admission to the SNF and while the individual was still under treatment for the condition for which he/she had received inpatient hospital services.

The original Physician certifications and recertifications will be filed in the patient's medical record in the Medicare section.