SCOPE:
Coordinated Care (Plan) Medical Management department and Claims Department

PURPOSE:
Allow approval and payment of Administrative days, after the DRG period is exhausted, when inpatient criteria is no longer met and placement in an alternative appropriate setting is not available despite documented, comprehensive discharge planning efforts.

POLICY:
Administrative Days may be approved when an inpatient hospital, Long Term Acute Care (LTAC) or Inpatient Rehabilitation (IPR) level of care is no longer medically necessary or appropriate, and non-hospital placement is not readily available.

Administrative days are paid at the HCA Administrative Day payment methodology. A Single Case Agreement (SCA) may be used in extenuating circumstances.

Administrative Days may be authorized when Health Plan determines Acute inpatient stay is no longer required and:

- A patient/member is awaiting placement into a lower level of care or home; AND
- There is documentation of ongoing discharge planning by the inpatient facility and Plan Discharge Planning Team (UMDP); AND
- No appropriate lower level of care is available to member.
- Member was admitted to inpatient from ED for the sole purpose of finding SNF placement. (commonly known as “social admits”)

The most common scenarios leading to Administrative Days are:

- History of IV drug abuse with access line for long term once daily or more frequent IV Antibiotics
- Current Tobacco user
- Behavioral issues causing safety issues
- Morbid obesity with decreased mobility
- Suitable facilities not available/at capacity
- Waiting for appointment of Medical Guardian
Administrative Days are not covered when:

- A member was not approved for at least one acute inpatient hospital day immediately preceding the initial request for administrative days; OR
- The only service required for member is custodial care: OR
- The days are only for the convenience of the recipient, recipient’s family or physician; OR
- The facility or physician refuse to cooperate with Health Plan discharge planning efforts or refuse placement at lower level of care or other available alternative setting; OR
- A facility has not provided documented evidence of a comprehensive discharge plan; OR
- There is not an acceptable reason and timeframe for unavoidable delay of discharge, such as awaiting a court date for appointment of medical guardianship, to allow an out-of-state NF placement, or surgical date; OR
- If the member’s stay becomes primarily behavioral health related please refer to policy WA.UM.01.02 Mixed Behavioral Health/Medical Services.

PROCEDURE:

- When inpatient criteria is no longer met per Medical Necessity Review policy (WA.UM.02.01) the CCR Nurse reviews the case against the InterQual Level I SNF criteria.
  
  o CCR Nurse sends to Medical Reviewer including the information the auth either meets or does not meet Admin Days Policy as demonstrated by SNF Level I criteria and attaches Administrative Days Policy (WA.UM.03.01).
  
  o Administrative days may also be met if the member has a history of IV drug abuse with access line for long term once daily or more frequent IV Antibiotics
- If Medical Director determines patient meets the criteria for Administrative Days, documents in the Advisor Review notes in TruCare “Criteria met for Administrative Days, please offer to facility.”
- The Health Plan notifies the facility of transition to an Administrative Day stay.
- A new inpatient authorization is created to differentiate the Acute Inpatient stay from the Administrative Day stay.
- If member is still inpatient the new auth for Admin Days is assigned to the UMDP team for continued discharge planning and reviews.
- Facility CM and UMDP staff continue to seek an alternate placement.
UMDP nurse will review case at a minimum of every 5 business days, documenting in a clinical review the member is meeting a minimum SNF Level 1 level of care.

- If the member no longer meets SNF Level 1 level of care the case will be sent to MD for Review.
- If MD denies continuation of Administrative Days, process an authorization Denial following WA.UM.07 – Adverse Determinations (Denial) Notices as with any other authorization.

If a member’s medical condition worsens during Admin Day stay:

- The UMDP nurse will send to Urgent CCR Nurse of the day to complete a Level I clinical review and communicate with UMDP nurse.
- If the member meets IP criteria the administrative Day authorization is closed and a new authorization is started.
- If the member does not meet IP criteria, the UMDP Nurse will continue with the Admin Day review.

Billing:

- Facilities that have approval to bill for Administrative Days must bill approved inpatient stay and Administrative Day(s) on separate claims;
  - One claim for the approved inpatient acute stay
  - One claim for the approved Administrative Day stay
- The inpatient acute stay must be billed with status code 30 to indicate they are submitting a separate claim for administrative days.
- Facilities can bill for medications and services given during an Administrative Days stay.
- The Administrative Days must be billed with the following Rev Codes:
  - Rev Code 0191
    - Inpatient Hospitals using PPS
    - Inpatient Hospitals that are CPE
    - Inpatient Hospitals that are Critical Access hospitals
  - Rev Code 0169
    - Inpatient Rehab Facilities
    - Long Term Acute Care (LTAC) facilities
- Administrative Days are not subject to outlier considerations. Outlier consideration is only applicable to the approved inpatient acute care stay.

Other Considerations:

- Administrative Day(s) only apply after the DRG period.
• Retrospective audit may be conducted

REFERENCES
HCA Inpatient Hospital Services Provider Guide (Rev. 10/1/2015)
WAC 182-550-1050
WA.UM.03 Post-Acute /Sub-Acute Care Review and Coordination
WA.UM.02.01 Medical Necessity Review (TruCare)

ATTACHMENTS

DEFINITIONS:
Administrative day – One or more days of a hospital stay in which an acute inpatient or observation level of care is not medically necessary, and a lower level of care is appropriate.

REVISION LOG:

<table>
<thead>
<tr>
<th>Revision</th>
<th>Date</th>
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<tbody>
<tr>
<td>Updated Billing section</td>
<td>12/15</td>
</tr>
<tr>
<td>Refined language and product type</td>
<td>1/16</td>
</tr>
<tr>
<td>Changes to procedure to clarify application of Administrative Days</td>
<td>9/16</td>
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<tr>
<td>Grammar corrections, Procedural elements removed, clarification of medication and services billing</td>
<td>8/17</td>
</tr>
<tr>
<td>Language added to clarify use of Administrative Days for scenarios outside SNF Level I criteria met</td>
<td>11/17</td>
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<tr>
<td>Added Admits for SNF placement only</td>
<td>3/18</td>
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POLICY AND PROCEDURE APPROVAL

The electronic approval retained in Compliance 360, Centene’s P&P management software, is considered equivalent to a physical signature.

Vice President of Medical Management: Signature on File
Vice President of Network Development & Contracting: Signature on File
Chief Operating Officer: Signature on File