

**§ 456.412 Records and reports.**

The UR plan must describe—

(a) The types of records that are kept by the group performing UR; and

(b) The type and frequency of reports made by the UR group, and arrangements for distribution of the reports to appropriate individuals.

**§ 456.413 Confidentiality.**

The UR plan must provide that the identities of individual recipients in all UR records and reports are kept confidential.

UR PLAN: REVIEW OF NEED FOR  
CONTINUED STAY

**§ 456.431 Continued stay review required.**

(a) The UR plan must provide for a review of each recipients continued stay in the ICF at least every 6 months to decide whether it is needed.

(b) The UR plan requirement for continued stay review may be met by—

(1) Reviews that are performed in accordance with the requirements of §§ 456.432 through 456.437; or

(2) Reviews that meet on-site inspection requirements under subpart I if—

(i) The composition of the independent professional review team under subpart I meets the requirements of § 456.406; and

(ii) Reviews are conducted as frequently as required under §§ 456.433 and 456.434.

**§ 456.432 Evaluation criteria for continued stay.**

The UR plan must provide that—

(a) The group performing UR develops written criteria to assess the need for continued stay.

(b) The group develops more extensive written criteria for cases that its experience shows are—

(1) Associated with high costs;

(2) Associated with the frequent furnishing of excessive services; or

(3) Attended by physicians whose patterns of care are frequently found to be questionable.

**§ 456.433 Initial continued stay review date.**

The UR plan must provide that—

(a) When a recipient is admitted to the ICF under admission review requirements of this subpart, the group performing UR assigns a specified date by which the need for his continued stay will be reviewed;

(b) The group performing UR bases its assignment of the initial continued stay review date on the methods and criteria required to be described under § 456.435(a);

(c) The initial continued stay review date is—

(1) Not later than 6 months after admission; or

(2) Earlier than 6 months after admission, if indicated at the time of admission; and

(d) The group performing UR insures that the initial continued stay review date is recorded in the recipient's record.

**§ 456.434 Subsequent continued stay review dates.**

The UR plan must provide that—

(a) The group performing UR assigns subsequent continued stay review dates in accordance with § 456.435.

(b) The group assigns a subsequent continued stay review date each time it decides under § 456.436 that the continued stay is needed—

(1) At least every 6 months; or

(2) More frequently than every six months if indicated at the time of continued stay review; and

(c) The group insures that each continued stay review date it assigns is recorded in the recipient's record.

**§ 456.435 Description of methods and criteria: Continued stay review dates.**

The UR plan must describe the methods and criteria that the group performing UR uses to assign initial and subsequent continued stay review dates under §§ 456.433 and 456.434.

**§ 456.436 Continued stay review process.**

The UR plan must provide that—

(a) Review of continued stay cases is conducted by—

(1) The group performing UR; or

(2) A designee of the UR group;

**§ 456.437**

(b) The group or its designee reviews a recipient's continued stay on or before the expiration of each assigned continued stay review date.

(c) For each continued stay of a recipient in the ICF, the group or its designee reviews and evaluates the documentation described under §456.411 against the criteria developed under §456.432 and applies close professional scrutiny to cases described under §456.432(b);

(d) If the group or its designee finds that a recipient's continued stay in the ICF is needed, the group assigns a new continued stay review date in accordance with §456.434;

(e) If the group or its designee finds that a continued stay case does not meet the criteria, the group or a subgroup that includes at least one physician reviews the case to decide the need for continued stay;

(f) If the group or subgroup making the review under paragraph (e) of this section finds that a continued stay is not needed, it notifies the recipient's attending physician or, in institutions for the mentally retarded, the recipient's qualified mental retardation professional, within 1 working day of its decision, and gives him 2 working days from the notification date to present his views before it makes a final decision on the need for the continued stay;

(g) If the attending physician or qualified mental retardation professional does not present additional information or clarification of the need for the continued stay, the decision of the UR group is final;

(h) If the attending physician or qualified mental retardation professional presents additional information or clarification, the need for continued stay is reviewed by—

(1) The physician member(s) of the UR group, in cases involving a medical determination; or

(2) The UR group, in cases not involving a medical determination; and

(i) If the individuals performing the review under paragraph (h) of this section find that the recipient no longer needs ICF services, their decision is final.

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**§ 456.437 Notification of adverse decision.**

The UR plan must provide that written notice of any adverse final decision on the need for continued stay under §456.436 (g) through (i) is sent to—

- (a) The ICF administrator;
- (b) The attending physician;
- (c) The qualified mental retardation professional, if applicable;
- (d) The Medicaid agency;
- (e) The recipient; and
- (f) If possible, the next of kin or sponsor.

**§ 456.438 Time limits for notification of adverse decision.**

The UR plan must provide that the group gives notice under §456.437 of an adverse decision not later than 2 days after the date of the final decision.

**Subpart G—Inpatient Psychiatric Services for Individuals Under Age 21: Admission and Plan of Care Requirements**

**§ 456.480 Scope.**

This subpart concerns admission and plan of care requirements that apply to inpatient psychiatric services for individuals under age 21 in hospitals, mental hospitals, and intermediate care facilities.

[43 FR 45266, Sept. 29, 1978, as amended at 61 FR 38399, July 24, 1996]

**§ 456.481 Admission certification and plan of care.**

If a facility provides inpatient psychiatric services to a recipient under age 21—

(a) The admission certification by the review team required in §441.152 satisfies the requirement for physician certification of need for care in §§ 456.60, 456.160, and 456.360; and

(b) The development and review of the plan of care required in §441.154 satisfies the requirement for physician recertification of need for care in the sections cited in paragraph (a) and the requirement for establishment and periodic review of the plan of care in §§ 456.80, 456.180, and 456.380.