Centers for Medicare & Medicaid Services, HHS

§ 456.231 Continued stay review required.

The UR plan must provide for a review of each beneficiary’s record, including the following:

(a) Identification of the beneficiary.
(b) The name of the beneficiary’s physician.
(c) Date of admission, and dates of application for and authorization of Medicaid benefits if application is made after admission.
(d) The UR committee may not include any individual who—
   (1) Is directly responsible for the care of patients whose care is being reviewed; or
   (2) Has a financial interest in any mental hospital.

UR PLAN: INFORMATIONAL REQUIREMENTS

§ 456.211 Beneficiary information required for UR.

The UR plan must provide that each beneficiary’s record includes information needed to perform UR required under this subpart. This information must include, at least, the following:

(a) Identification of the beneficiary.
(b) The name of the beneficiary’s physician.
(c) Date of admission, and dates of application for and authorization of Medicaid benefits if application is made after admission.
(d) The plan of care required under § 456.172.
(e) Initial and subsequent continued stay review dates described under §§ 456.233 and 456.234.
(f) Reasons and plan for continued stay, if the attending physician believes continued stay is necessary.
(g) Other supporting material that the committee believes appropriate to be included in the record.

§ 456.212 Records and reports.

The UR plan must describe—

(a) The types of records that are kept by the committee; and
(b) The type and frequency of committee reports and arrangements for their distribution to appropriate individuals.

§ 456.213 Confidentiality.

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

UR PLAN: REVIEW OF NEED FOR CONTINUED STAY

§ 456.231 Continued stay review required.

The UR plan must provide for a review of each beneficiary’s continued stay in the mental hospital to decide