§ 456.243  Content of medical care evaluation studies.

Each medical care evaluation study must—
(a) Identify and analyze medical or administrative factors related to the mental hospital’s patient care;
(b) Include analysis of at least the following:
   (1) Admissions.
   (2) Durations of stay.
   (3) Ancillary services furnished, including drugs and biologicals.
   (4) Professional services performed in the hospital; and
   (c) If indicated, contain recommendations for change beneficial to patients, staff, the hospital, and the community.

§ 456.244  Data sources for studies.

Data that the committee uses to perform studies must be obtained from one or more of the following sources:
(a) Medical records or other appropriate hospital data.
(b) External organizations that compile statistics, design profiles, and produce other comparative data.
(c) Cooperative endeavors with—
   (1) QIOs;
   (2) Fiscal agents;
   (3) Other service providers; or
   (4) Other appropriate agencies.

§ 456.245  Number of studies required to be performed.

The mental hospital must, at least, have one study in progress at any time and complete one study each calendar year.

Subpart E—Reserved

§ 456.350  Scope.

This subpart prescribes requirements for control of utilization of intermediate care facility (ICF) services including requirements concerning—
(a) Certification of need for care;
(b) Medical evaluation and admission review;
(c) Plan of care; and
(d) Utilization review plans.

§ 456.351  Definition.

As used in this subpart: Intermediate care facility services means those items and services furnished in an intermediate care facility as defined in §§440.140 and 440.150 of this subchapter, but excludes those services if they are provided in religious nonmedical institutions as defined in §440.170(b) of this chapter.

§ 456.360  Certification and recertification of need for inpatient care.

(a) Certification. (1) A physician must certify for each applicant or beneficiary that ICF services are or were needed.
   (2) The certification must be made at the time of admission or, if an individual applies for assistance while in an ICF, before the Medicaid agency authorizes payment.
   (b) Recertification. (1) A physician, or physician assistant or nurse practitioner (as defined in §491.2 of this chapter) acting within the scope of practice as defined by State law and under the supervision of a physician, must recertify for each applicant or beneficiary that ICF services are needed.
      (2) Recertification must be made at least—
         (i) Every 12 months after certification in an institution for Individuals with Intellectual Disabilities or persons with related conditions; and
         (ii) Every 60 days after certification in an ICF other than an institution for