



What's up Doc? case management news

Inpatient vs. Observation Status

PURPOSE OF AN OBSERVATION BED

“To evaluate an outpatient’s condition to determine the need for possible admission as an inpatient.”

OBSERVATION SERVICES DEFINED:

Well defined set of specific, clinically appropriate services which include:

- Ongoing short term treatment
- Assessment, and reassessment....

...before a decision can be made regarding whether patients will require further treatment as hospital inpatients or if they are able to be discharged from the hospital.

Observation is commonly assigned to patients who present to the emergency department and who then require a **significant** period of **treatment or monitoring** before a decision is made concerning their admission or discharge.”

How long can a patient be placed in observation?

- At least 8 hours ... usually less than 24
- Only in extremely rare cases more than 48.

When is Observation non-covered?

- Non reasonable or necessary service
- For convenience of patient, patient’s family, physician
- When the patient is appropriate for inpatient admission

Who are appropriate observation patients?

- Chest pain
- Asthma
- CHF
- Gastroenteritis
- Dehydration
- Syncope
- Asthma
- Etc....

Ask yourself...

Can the patient’s condition be evaluated or treated within 24 hours and/or is rapid improvement of the patients condition anticipated within 24 hours?

PLACE IN OBSERVATION!

Points to Remember...

CORRECT ORDER VERBIAGE:

- ADMIT TO INPATIENT
- PLACE IN OBSERVATION

INPATIENT SERVICES DEFINED

Physicians should use a 24-hour period as a benchmark, i.e., they should order admission for patients who are **expected** to need hospital care for more than 24 hours, and treat other patients as an outpatient basis.

OBSERVATION CANNOT BE ORDERED FOLLOWING OUTPATIENT SURGERY

*Unless there was a complication: bleeding, arrhythmia(s), psychotic behavior.

*Delayed recovery from anesthesia. Unable to void. Uncontrolled pain or vomiting. Determined **only after** a 6 hour outpatient recovery period.



NEWS BRIEF

Hospital settles major admission-necessity case

An Atlanta nonprofit hospital will pay \$26 million dollars for billing Medicare for medically unnecessary inpatient admissions .

Questions? Contact Debbie Picou, RN 873-1833