

PROTOCOL IV

Subject: Concurrent Review Process

Effective Date: 1/01

Revised Date: 7/03

NHP requires all hospital, inpatient rehabilitation facility and skilled nursing facility admissions to be pre-certified prior to admission with exception of admissions from the emergency room and admissions to the ICU/CCU or admission for emergency surgery. NHP or its delegated entities must be notified by the next business following admission if the admission occurs as a result of the above exception.

The provider must provide clinical information that justifies the medical necessity of the admission, by the next business day following the admission. All questionable cases will be referred to the medical director for final determination.

The continued stay for all inpatient admissions must be certified through the concurrent review process. Upon request, the provider must submit to NHP or its delegated entities, by phone, or fax, sufficient clinical information to justify the continued stay and to allow the review of the customer's medical status during an inpatient stay, extend the customer's stay, coordinate the discharge plan, determine medical necessity at an appropriate level of care, and to perform quality assurance screening.

All discharge planning, and cases requiring comprehensive services for catastrophic or chronic conditions are coordinated through NHP Case Management, including OB care.

If the diagnosis or treatment of a patient is delayed secondary to the inability of the facility to provide a needed service, payment for these days will be denied. This includes, but is not limited to, the unavailability of diagnostic and/or surgical services on weekends and holidays, delays in the interpretation of diagnostic testing, delays in obtaining requested consultations and late rounding by the admitting physician.

IMPORTANT: Reimbursement for continued stay that does not meet NHP medical necessity criteria will be denied. The patient cannot be billed for these services unless they have signed a waiver of liability or the service are denied as non-covered services. The customer is held harmless in these proceedings.