

Part B Insider (Multispecialty) Coding Alert

Hospital Admissions: Doctors Could Have 30 Days Before Admission To Perform Exam

Podiatrists may gain hospital admitting privileges

Good news: **The Centers for Medicare and Medicaid Services** could be giving providers some breathing room on important hospital care issues.

After pressure from doctors, CMS agreed to revise its policies on hospital admissions. The changes came in the proposed rule for revising hospital conditions of participation, published in the March 25 Federal Register (Vol. 70, No. 57, pp.15266-15274).

The current Medicare policy requires a doctor to perform a physical exam and history for every patient within seven days before, or 48 hours after, a hospital admission. Only a medical doctor or osteopath can perform the history and exam - or an oromaxillofacial surgeon in the case of patients admitted only for oromaxillofacial surgery.

The **American Podiatric Medical Association** protested this requirement, which prevented podiatrists from performing the exam and history. And the **American Medical Association** pointed out that the **Joint Commission on Accreditation of Healthcare Organizations** allows a history and exam if performed within 30 days before admission, as long as the medical record documents any changes in the patient's condition afterwards.

Result: Under CMS' new proposal, physicians could examine the patient up to 30 days before admission, as long as they followed up on any changes in the patient's condition before admission. Physicians would have 24 hours after admission to document a history and exam and any changes in condition. CMS also proposes to allow "any qualified individual" who has medical staff privileges in accordance with state law to perform the physical and history.

The new proposal will make a big difference for podiatrists rendering hospital care. Currently, podiatrists must ask an MD or DO to admit their patients. But if podiatrists can perform the admitting history and physical exam themselves, then they can admit patients under their own names. This change will allow greater time efficiency that will give doctors a bit more leeway - and the proposal will also ease confusion over conflicting CMS/JCAHO rules, says **Jo Anne Steigerwald**, senior consultant with the **Wellington Group** in Baraboo, WI.

But "podiatrists seldom will be admitting," notes a CMS official. "Where this affects them more will be in the outpatient surgery arena." A podiatrist may have a "straightforward healthy patient" who needs a current history and physical to go into surgery, and now the podiatrist will be able to perform them himself, the official notes.

More news: CMS wants to revise the rule requiring providers to give written confirmation of verbal orders. Under the new proposal, doctors would have to confirm the orders within the timeframes specified by state law, or within 48 hours if state law doesn't specify otherwise. Also, CMS clarified that the provider who is responsible for a patient's care must be the one to order drugs and biologicals - except for influenza or pneumococcal polysaccharide vaccines, which can be administered according to physician-approved hospital policy.

Also, the medical community asked CMS to revise a requirement that the individual who administers anesthesia must write the postanesthesia follow-up report. CMS agreed to revise this requirement to allow any individual qualified to administer anesthesia to write the postanesthesia report.