

# NHP/NHIC-Notice of Non-Coverage of Inpatient Hospital Care

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## **Abstract/Purpose:**

Notice of non-coverage of inpatient hospital care informs PlatinumPlus members that their covered inpatient hospital care is ending.

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### **I. Policy:**

- A. NHP/NHIC provides written notice of non-coverage of inpatient hospital stays (Notice of Discharge and Medicare Appeal Rights (NODMAR) - Addendum A) to PlatinumPlus members or the member's representative when the member:
  - 1. disagrees with the discharge or
  - 2. is not being discharged but the hospital inpatient stay will no longer be covered, i.e. the member's level of care is changed from inpatient acute to a lower level of care within the same hospital facility.
- B. The notice of non-coverage is issued to the member or member's representative no later than the day before inpatient hospital coverage ends.
- C. When a member is incapable of receiving or incompetent to receive the NODMAR, the member's representatives is issued the NODMAR
  - 1. Attempt is made to obtain the representative's signature through direct contact
  - 2. If unable to obtain through direct contact, telephonic notice is provided
    - a. The information provided telephonically includes the information outlined under letter E below and the number to an advocacy organization that can provide assistance to the representative in explaining the appeal process ( i.e. 1-800-MEDICARE)
  - 3. If unable to reach telephonically, the notice is sent to the representative via certified mail
  - 4. The date that NHP/NHIC conveys the NODMAR information, in writing or telephonically, to the representative is the date of receipt of NODMAR notice. If sent via certified mail, the date of NODMAR receipt is the date that someone at the representative's address signs or refuses to sign the certified mail receipt. If notified via certified mail, the member's liability starts on the second working day after NHP/NHIC's mailing date.
  - 5. The physician who is responsible for the member's inpatient care must concur with the decision to discharge or the decision to change level of care within the inpatient hospital setting.
  - 6. The written notice of non-coverage includes:
    - a. The reason why inpatient hospital care is no longer needed or covered.

- b. The effective date and time of the member's liability for the continued inpatient care (at least noon of the day after notice is provided).
- c. The member's appeal rights.
- d. The new lower level of care being covered at the hospital facility, if applicable.
- e. Any additional CMS specified information.

II. **Procedure:**

- A. Upon notification by an inpatient hospital facility that the physician responsible for the member's care concurs with the member's planned discharge, NHP/NHIC Care Management Coordinator (CMC) determines if the member:
  - 1. Disagrees with the discharge or
  - 2. If the member's level of care is being changing to a lower level with in the same hospital facility.
- B. If the member or the member's representative disagrees or the member's level of care is lowered, the CMC completes the Notice of Discharge & Medicare Appeal Rights (NODMAR) including the information outlined above.
- C. CMC faxes completed NODMAR form to the applicable inpatient facility for the member's or the member's authorized representative's signature at least the day before coverage ends.
- D. Inpatient facility obtains the member's/authorized representative's signature
  - 1. If the member's representative is signing the NODMAR form, The Appointment of Representative Statement form, must be signed and on file at NHP/NHIC as well (Addendum B)
  - 2. If the representative is not available to sign the NODMAR, NHP/NHIC CMC notifies the representative telephonically of when the member's inpatient services will no longer be covered and the right to file an appeal, including information in letter E above.
  - 3. If the representative is not available telephonically, NHP/NHIC CMC sends the NODMAR by certified mail.
- E. The provider retains the signed NODMAR form for their records and faxes a copy to NHP/NHIC.
- F. If the member refuses to sign the NOMNC the provider documents that the notice was given and that member refused to sign and faxes documentation to NHP/NHIC.
- G. NHP/NHIC CMC documents receipt of the NODMAR and if applicable the member's refusal to sign in the authorization module of the NHP/NHIC information system and files the NODMAR form and applicable provider documentation in the member's case file.

- H. If the member representative is notified telephonically, the NHP/NHIC CMC documents the telephonic notification attempt(s) and if successful documents whether the representative understood the information provided.
  
- I. If telephonic attempt is unsuccessful, NHP/NHIC CMC documents notification via certified mail and documents when the certified mail return receipt is received noting if it was signed or not. NHP/NHIC CMC files the certified mail receipt in case file.