



## Hospital Notification Requirements

A new Minnesota law was passed in 2015 (Minnesota Statute 144.586) that requires hospitals licensed in Minnesota to provide certain oral and written information to patients during their hospital stay or prior to hospital discharge. The intent is to provide hospital patients additional information about their hospital stay, which could affect hospital and postacute care Medicare payment options, and improved information about appropriate Medicare certified postacute care options available in the surrounding community.

**The information below describes what patients should expect to receive from hospitals under the new requirements.**

Notice of Observation Outpatient Status	Notice of Postacute Care and Discharge Planning
<p>The hospital must provide oral and written notice to each patient the hospital places in observation status no later than 24 hours after such placement. The oral and written notice must include:</p> <ol style="list-style-type: none"> <li>1. A statement that the patient is not admitted to the hospital but is under observation status</li> <li>2. A statement that observation status days may affect the patient's Medicare coverage for:               <ol style="list-style-type: none"> <li>i. hospital services, including medications and pharmaceutical supplies;</li> <li>ii. home or community-based care or care at a skilled nursing facility upon the patient's discharge from the hospital</li> </ol> </li> <li>3. A recommendation that the patient contact the patient's health insurance provider or the Office of the Ombudsman for Long-Term Care or Office of the Ombudsman for State Managed Health Care Programs or the Beneficiary and Family Centered Care Quality Improvement Organization to better understand the implications of placement in observation status</li> </ol> <p>The hospital must document the date in the patient's record that the notice was provided to the patient or the patient's representative.</p>	<p>The patient's medical record must establish and document an appropriate discharge plan. The discharge plan evaluation must comply with the following elements:</p> <ol style="list-style-type: none"> <li>1. The likelihood of the patient needing post hospital services and of the availability of those services</li> <li>2. The patient's capacity for self-care or the possibility of the patient being cared for in the environment from which the patient entered the hospital</li> <li>3. The discharge plan must be completed timely so that appropriate arrangements for post hospital care are made before discharge, and to avoid unnecessary delays in discharge</li> <li>4. The hospital must discuss the results of the discharge evaluation with the patient or individual acting on behalf of the patient</li> <li>5. The hospital must reassess the patient's discharge plan if the hospital determines that there are factors that may affect continuing care needs or the appropriateness of the discharge plan</li> <li>6. The hospital must providing counseling, as needed, for the patient and family members or interested persons to prepare them for post hospital care</li> <li>7. The hospital must provide a list of available Medicare-eligible home care agencies or skilled nursing facilities that serve the patient's geographic area, or other area requested by the patient if such care or placement is indicated and appropriate</li> <li>8. Once the patient has designated their preferred postacute providers, the hospital must assist the patient in securing care covered by their health plan or within the care network</li> <li>9. The hospital must not specify or otherwise limit the qualified providers that are available to the patient</li> <li>10. The hospital must document in the patient's record that the list was presented to the patient or to the individual acting on the patient's behalf</li> </ol>