

## **HOSPITAL ISSUED NOTICES OF NON-COVERAGE (HINN)**

Hospitals (including ones with swing beds) have the authority to issue notices of non-coverage to beneficiaries or their representatives if the hospital determines that the care the beneficiary is receiving, or is about to receive, is not covered because it is not medically necessary, is not delivered in the most appropriate setting, or is custodial in nature. A HINN may be given prior to admission, at admission, or at any point during the inpatient stay.

**NOTE:** The hospital is not required to issue an HINN when it does not plan to bill the beneficiary (or his/her representative).

### ISSUANCE OF HOSPITAL ISSUED NOTICES OF NON-COVERAGE

- A. Preadmission/Admission HINNs.--The hospital issues a notice of non-coverage when it determines that the admission is not medically necessary, is inappropriate, or is custodial in nature. The hospital is not required to obtain the attending physician's concurrence or Quality Improvement Organization (Louisiana Health Care Review) preadmission or admission notice of non-coverage. This also applies to HINNs related to direct admissions to swing beds (i.e., beneficiary is admitted to the swing bed after he/she was discharged from another hospital) or when the hospital determines that the beneficiary does not need SNF services.
- B. Continued Stay HINNs.--A hospital may issue a continued stay notice of non-coverage when it determines that a beneficiary no longer requires continued inpatient care and either the attending physician or you concur. Before a hospital can issue a continued stay notice of non-coverage, it must consider the admission to be covered and
1. Attending Physician Concurs.--If the attending physician concurs in writing (e.g., written discharge order) with the hospital's determination that the beneficiary no longer requires inpatient care, the hospital may issue a notice of non-coverage to the beneficiary.
  2. Attending Physician Does Not Concur.--The hospital is required to give a notice to the beneficiary (or his/her representative) when the beneficiary's physician disagrees with the hospital's proposed notice of non-coverage. The notice must be given to the beneficiary (or his/her representative) concurrently when the hospital requests LHCR's review. (See §414.11 of the Hospital Manual, Exhibit 10.) The hospital may request, either by phone or in writing that an immediate review be performed by LHCR. LHCR will complete the review within 2 working days of either the hospital's request or receipt of any additional information you requested (such as copies of medical records). If LHCR concur with the hospital's decision, the hospital is notified that they may issue its HINN and LHCR will issue a denial notice to the beneficiary.  
  
**NOTE:** In cases where the beneficiary requires a SNF level of care, the hospital cannot issue a notice of non-coverage if a SNF bed is not available. Medicare pays hospitals for days awaiting placement until a SNF bed is available, and the medical record documentation indicates that SNF placement is actively being sought.
  3. Advance Continued Stay HINNs.--The hospital could project and determine when acute care furnished to a beneficiary would end and issue a continued stay notice of non-coverage (with the attending physician's concurrence or LHCR). If a hospital is able to determine in advance that the beneficiary will not require acute inpatient hospital care as of a certain date, it may give the notice of non-coverage in advance of that date (but ordinarily no earlier than 3 days before the first non-covered day).

**EXAMPLES:** The beneficiary had hip surgery and requires rehabilitative services, but not at an acute hospital level of care. The hospital determines that the most appropriate setting for those services would be a SNF and makes arrangements to transfer the beneficiary (within 3 days) since a SNF bed will be available.

The beneficiary is recovering from an uneventful post-surgical period (after a cholecystectomy). The hospital can predict that within 2 days the beneficiary will no longer require injections for pain control and will tolerate a regular diet and ambulation.

The advance notice does not relieve the hospital or the attending physician of the responsibility for monitoring the beneficiary's condition/level of care changes, or for making appropriate discharge planning. If after the notice is issued, the beneficiary's condition/level of care changes and acute care is further required (or the SNF bed is no longer available), then the hospital must rescind its notice of non-coverage.

- C. Combined Notices in Swing Bed Situations.--The "combined notice" applies to situations where the beneficiary is in an acute care hospital which has beds certified as swing beds, and he/she no longer requires an acute level of care.

The discharge from the acute care bed and admission to the (SNF or NF) swing bed are essentially paper transactions, with no physical movement of the beneficiary. The purpose of the combined notice is to notify the beneficiary (or his/her representative) that neither the acute nor SNF care is medically necessary, or that the beneficiary no longer requires acute care hospital services, but will begin to receive SNF swing bed services. The combined notice also notifies the beneficiary (or his/her representative) that if he/she disagrees with the hospital's decision, the beneficiary may request an immediate review from LHCR.

The hospital must issue the combined notice of non-coverage with either the attending physician's or LHCR's. The two post-discharge planning days applicable to PPS hospital cases would not apply to this situation. The beneficiary's (or his/her representative's) liability for payment begins the day following the date of receipt of the notice. The beneficiary may request your immediate review. However, the beneficiary's liability remains the same as specified in the HINN.

- D. Continued Stay HINNs in Swing Beds Treated as SNF Beds.--The hospital does not need the attending physician's concurrence or LHCR's to issue a continued stay HINN to a beneficiary when SNF swing bed services are no longer needed.

### **Notice of Discharge and Medicare Appeal Rights (NODMARs):**

Medicare+Choice payers work with providers in issuing these notices to managed care patients. Patients have the same review rights as with HINNs and both provider and payer are responsible for issuing correct notices. The review process follows the HINN model.