

Inpatient Psychiatric Facility: Three-Day or Less Interruptions

1/23/2025

Closed Captioning: *Auto-generated closed captioning is enabled in this course and is at best 70-90% accurate. Words prone to error include specialized terminology, proper names and acronyms.*



Disclaimer

National Government Services, Inc. has produced this material as an informational reference for providers furnishing services in our contract jurisdiction. National Government Services employees, agents, and staff make no representation, warranty, or guarantee that this compilation of Medicare information is error-free and will bear no responsibility or liability for the results or consequences of the use of this material. Although every reasonable effort has been made to assure the accuracy of the information within these pages at the time of publication, the Medicare Program is constantly changing, and it is the responsibility of each provider to remain abreast of the Medicare Program requirements. Any regulations, policies and/or guidelines cited in this publication are subject to change without further notice. Current Medicare regulations can be found on the [CMS website](#).



Recording

Attendees/providers are never permitted to record (tape record or any other method) our educational events. This applies to webinars, teleconferences, live events and any other type of National Government Services educational events.

Objectives

After this session, attendees will be able to define a an “interrupted stay,” a “three-day or less interruption” (also known as an “up to three-day interruption”), count the days of interruption and report the interruption(s) on your IPF claims. Additionally, attendees will know how to handle situations in which a beneficiary receives services at another facility during an interruption.

Today's Presenters

- Provider Outreach and Education Consultants
 - Christine Janiszczak
 - Jean Roberts, RN, BSN, CPC





Agenda

[Interrupted Stays](#)

[Interrupted Stays – Submitting Claims](#)

[Services Rendered at Other Facilities](#)

[Payment When Interrupted Stay Occurred](#)

[Resources](#)

[Questions](#)

Interrupted Stays

Interrupted Stay – Defined

- “Interrupted stay” occurs when beneficiary
 - Incurs “three-day or less interruption” in IPF stay
- “Three-day or less interruption” occurs when beneficiary
 - Discharged/transferred/leaves from IPF and
 - Readmitted/returns to same or different IPF within three days

Did You Know...

- It does not matter where beneficiary is during three-day or less interruption from IPF. If the three-day or less definition is met, then such an interruption has occurred.



Interrupted Stay – Counting the Three Days

- Count days accurately - consecutive calendar days
 - Day one
 - Day of original discharge/transfer from IPF
 - Ends at midnight
 - Days two and three
 - Two consecutive calendar days that follow day one
 - Each day ends at midnight
- Readmission/return to same or different IPF must be by midnight of day three

One-Day, Two-Day and Three-Day Interruptions

- **One-day** interruption; beneficiary
 - Discharged/transferred/leaves from IPF and
 - Readmitted/returns to same or different IPF by midnight on same day
- **Two-day** interruption: beneficiary
 - Discharged/transferred/leaves from IPF and
 - Readmitted/returns to same or different IPF by midnight on next day
- **Three-day** interruption: beneficiary
 - Discharged/transferred/leaves from IPF and
 - Readmitted/returns to same or different IPF by midnight on second following day

Interrupted Stay – Examples

- Situation: Beneficiary
 - Admitted to IPF on 1/1
 - Discharged/transferred/leaves from IRF on 1/5
 - Readmitted/returns to same or different IPF by midnight on
 - 1/5 = one-day interruption
 - 1/6 = two-day interruption
 - 1/7 = three-day interruption
 - Discharged/transferred from IPF on 1/31 (final)



Interrupted Stays – Submitting Claims

Interrupted Stay – Submitting Claims When Definition Met

- If readmission/return to **same IPF in three days or less** (by midnight of day three)
 - Submit **one claim**
 - Combine both stays (original stay and readmission/return stay)
 - Report on claim
 - Original date of admission
 - PSC that represents final discharge
 - Coding for all two-day and/or three-day interruptions
 - Do not report on claim
 - Coding for one-day interruptions

Interrupted Stay – Submitting Claims When Definition Met (continued)

- If readmission/return to **different IPF in three days or less** (by midnight of day four or later)
 - Each IPF submits claim
 - For payment purposes, stay considered continuous

Interrupted Stay – Submitting Claims When Definition Not Met

- If readmission/return to **same IPF in more than three days** (by midnight of day four or later)
 - Submit **two claims**:
 - Original stay through first discharge/transfer
 - Readmission/return through final discharge/transfer
- If readmission/return to **different IPF in more than three days** (by midnight of day four or later)
 - Each IPF submits claim

Interrupted Stay – Claim Coding

- OSC 74 and from/through dates in FLs 35-36
 - From = date of original discharge/transfer from IRF
 - Through = Last date beneficiary not present in IRF at midnight
- Noncovered days in FLs 39-41 with VC 81
 - One noncovered day for two-day interruption (VC 81 = 1.00)
 - Two noncovered days for three-day interruption (VC 81 = 2.00)
- Revenue code 0180 in FL 42; units in FL 46 (no rate/charges)
 - One unit for two-day interruption (units = 1)
 - Two units for three-day interruption (units = 2)

One-Day Interruption Example

- Example: Beneficiary
 - Admitted to IPF on 1/1
 - Discharged/transferred/leaves from IPF on **1/5**
 - Readmitted/returns to same IPF by midnight on **1/5**
 - Discharged/transferred from IPF on 1/31 (final)
- Action: Submit one claim 1/1-1/31
 - Do not report one-day interruption

Two-Day Interruption Example

- Example: Beneficiary
 - Admitted to IPF on 1/1
 - Discharged/transferred/leaves from IPF on **1/5**
 - Readmitted/returns to same IPF by midnight on **1/6**
 - Discharged/transferred on 1/31 (final)
- Action: Submit one claim 1/1-1/31 and report:
 - **OSC 74**
 - From date = 1/5
 - Through date = 1/5
 - **Noncovered days = One**
 - **Revenue code 0180 units = One**

Three-Day Interruption Example

- Example: Beneficiary
 - Admitted to IPF on 1/1
 - Discharged/transferred/leaves from IPF on **1/5**
 - Readmitted/returns to same IPF by midnight on **1/7**
 - Discharged/transferred on 1/31 (final)
- Action: Submit one claim 1/1-1/31 and report:
 - **OSC 74**
 - From date = 1/5
 - Through date = 1/6
 - **Noncovered days = Two**
 - **Revenue code 0180 units = Two**

Did You Know...

- The number of noncovered days reported and the number of units reported with revenue code 0180 must match the number of days represented in the OSC 74 period(s)



RTP Claims

- If you submit separate claims when three-day or less interruption occurred
 - You will receive RTP claim(s) with reason code C7278
 - Combine inpatient stays into one claim and report claim coding for any two-day and/or three-day interruptions
- To prevent potential RTP claims
 - We recommend you hold your discharge claims for at least three days
 - Beneficiary may be readmitted/return to your IPF within three days

Multiple Interruptions on Single Claim

- Beneficiary may be discharged/transferred/leave from IPF and readmitted/return to same IPF, within three days, **many times**
 - Continue to combine stays into one claim and report coding for all two-day and/or three-day interruptions
 - On claim from admission to final discharge/transfer, report
 - Multiple OSC 74s; one for each two-day and three-day interruption
 - Total noncovered days including those for all two-day and three-day interruptions
 - Total units for revenue code 0180 related to all two-day and three-day interruptions

Multiple Interruptions on Single Claim - Example

- Beneficiary incurred interruptions during 1/1-1/31

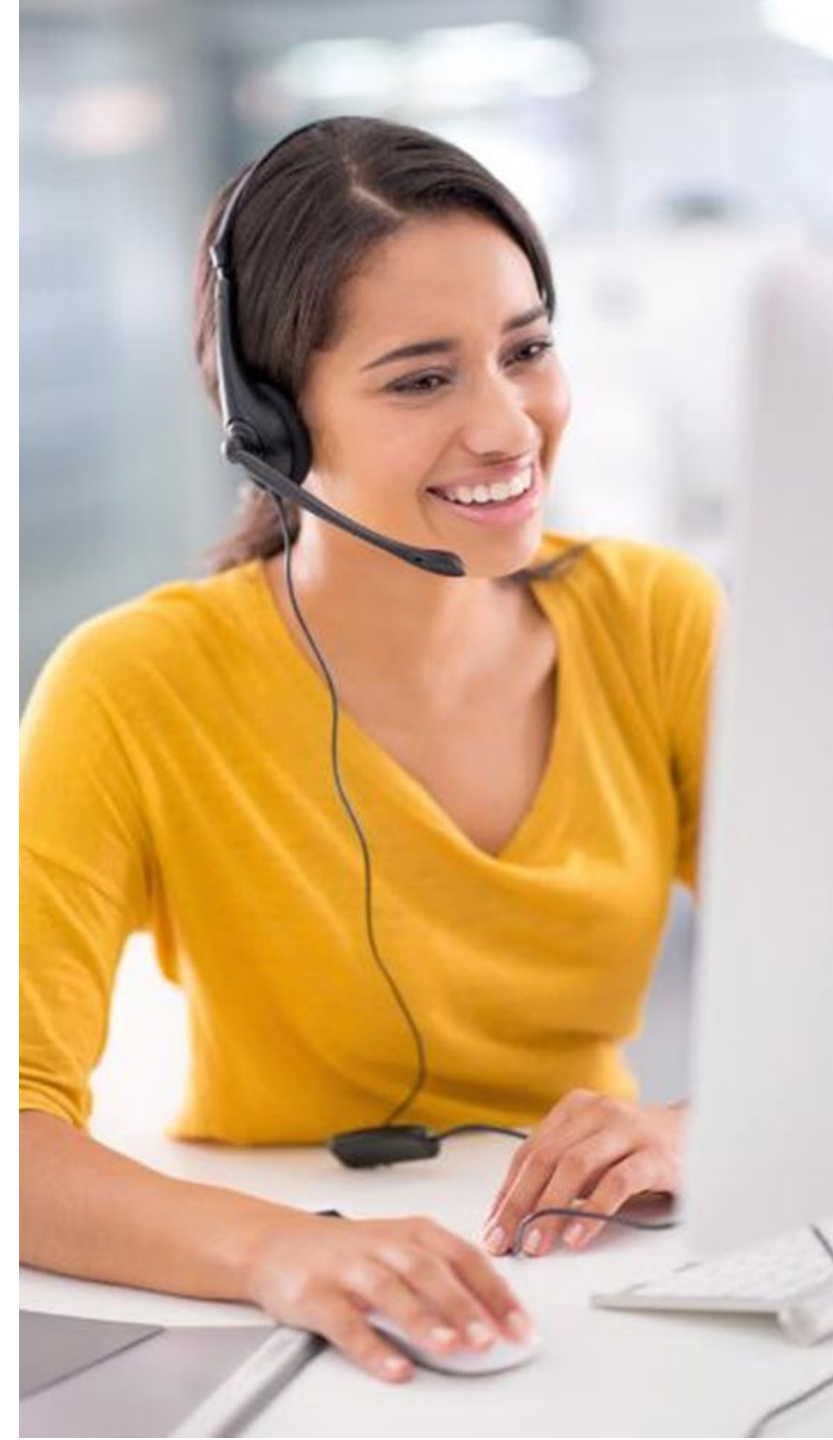
Discharged/Transferred /Leaves On...	Readmitted>Returns On...	Interruption of...
1/5	1/6	Two days
1/14	1/16	Three days
1/19	1/20	Two days
1/24	1/26	Three days

Multiple Interruptions on Single Claim – Example (continued)

- Submit one claim 1/1-1/31 and report:
 - OSCs 74:
 - 1/5-1/5 (one day for two-day interruption)
 - 1/14-1/15 (two days for three-day interruption)
 - 1/19-1/19 (one day for two-day interruption)
 - 1/24-1/25 (two day for three-day interruption)
 - Noncovered days = six
 - Revenue code 180 units = six

Did You Know...

- There is only so much room on a single claim for OSCs and only so many days you should report in each OSC for two-day and three-day interruptions



Multiple Interruptions on Single Claim – Coding Maximums



OSCs

- Ten OSCs on single claim (74 and others)
- If more than ten, follow [CR6777](#)



Days in OSC 74

- One for each two-day interruption
- Two for each three-day interruption
- 20 for multiple three-day interruptions



Noncovered Days

- One for each two-day interruption
- Two for each three-day interruption
- 20 for multiple three-day interruptions

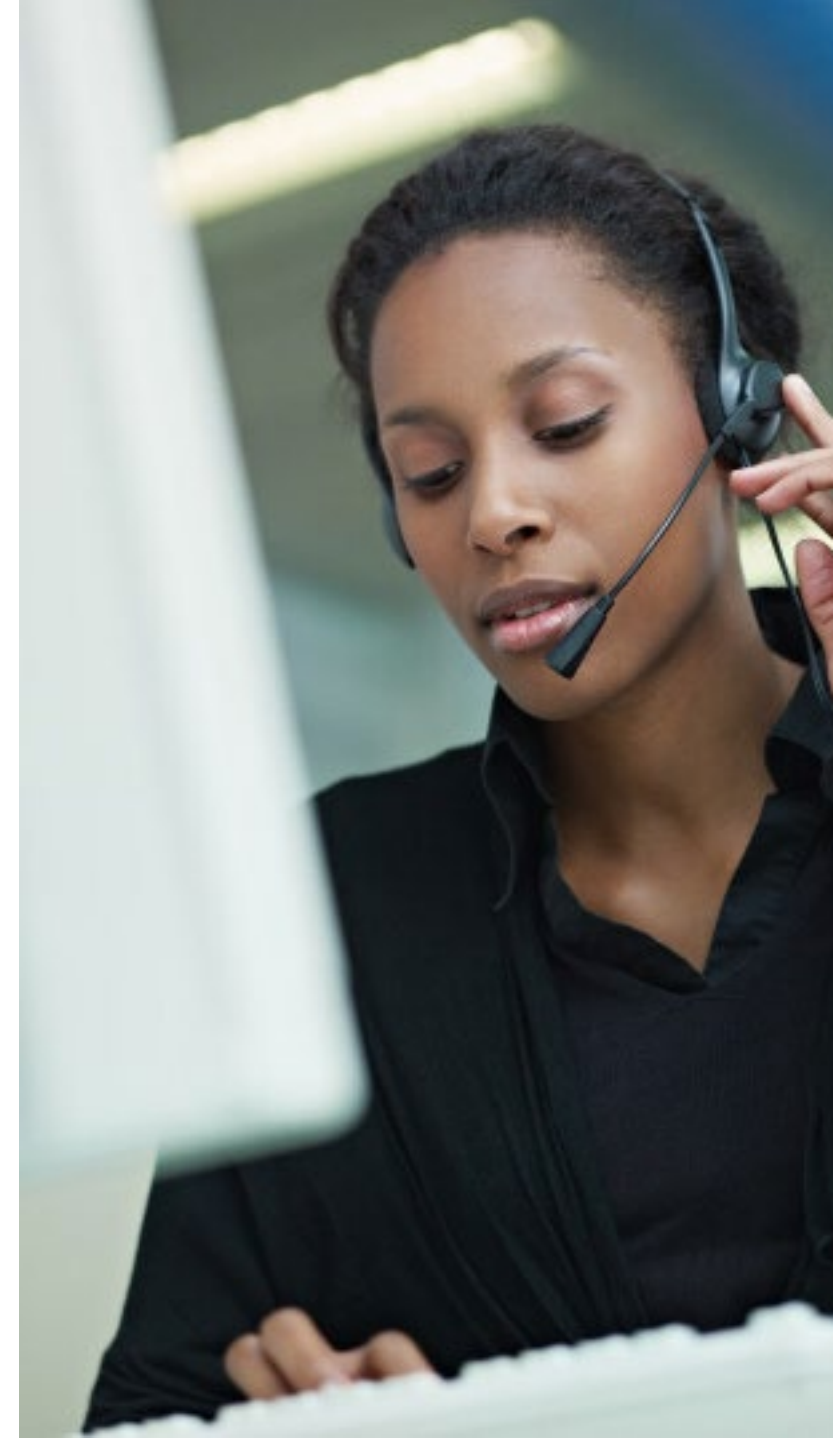


Revenue Code 0180 Units

- One for each two-day interruption
- Two for each three-day interruption
- 20 for multiple three-day interruptions

Did You Know...

- Three-day or less interrupted stay claim coding guidelines continue to apply even after a beneficiary's Medicare IP hospital benefit days exhaust



Services Rendered at Other Facilities

Services to Inpatients and Under Arrangement

- All hospitals responsible for providing services to inpatients
 - Provide directly or **under arrangement**
 - Send beneficiary to another facility for services you could not provide
 - Usually OP services, beneficiary returns to IP on same day
 - Reimburse that facility for such services
 - Ensure other facility understands arrangement to prevent double billing
 - Report on claim arranged service and its cost including transportation cost
 - Revenue code for arranged service only; not for transportation (0540)
- Reference:
 - [CMS IOM Publication 100-04, Medicare Claims Processing Manual, Chapter 3, Section 10.4](#)

Under Arrangement Example

- Example:
 - IPF inpatient requires MRI
 - Send beneficiary to ACH for MRI on 1/15 at 8am by ambulance
 - Beneficiary returns to same IPF on 1/15 at 1pm
- Action:
 - Pay ACH for MRI
 - Pay transportation provider for ambulance
 - On IP claim, report revenue code for MRI with total cost for MRI and transportation



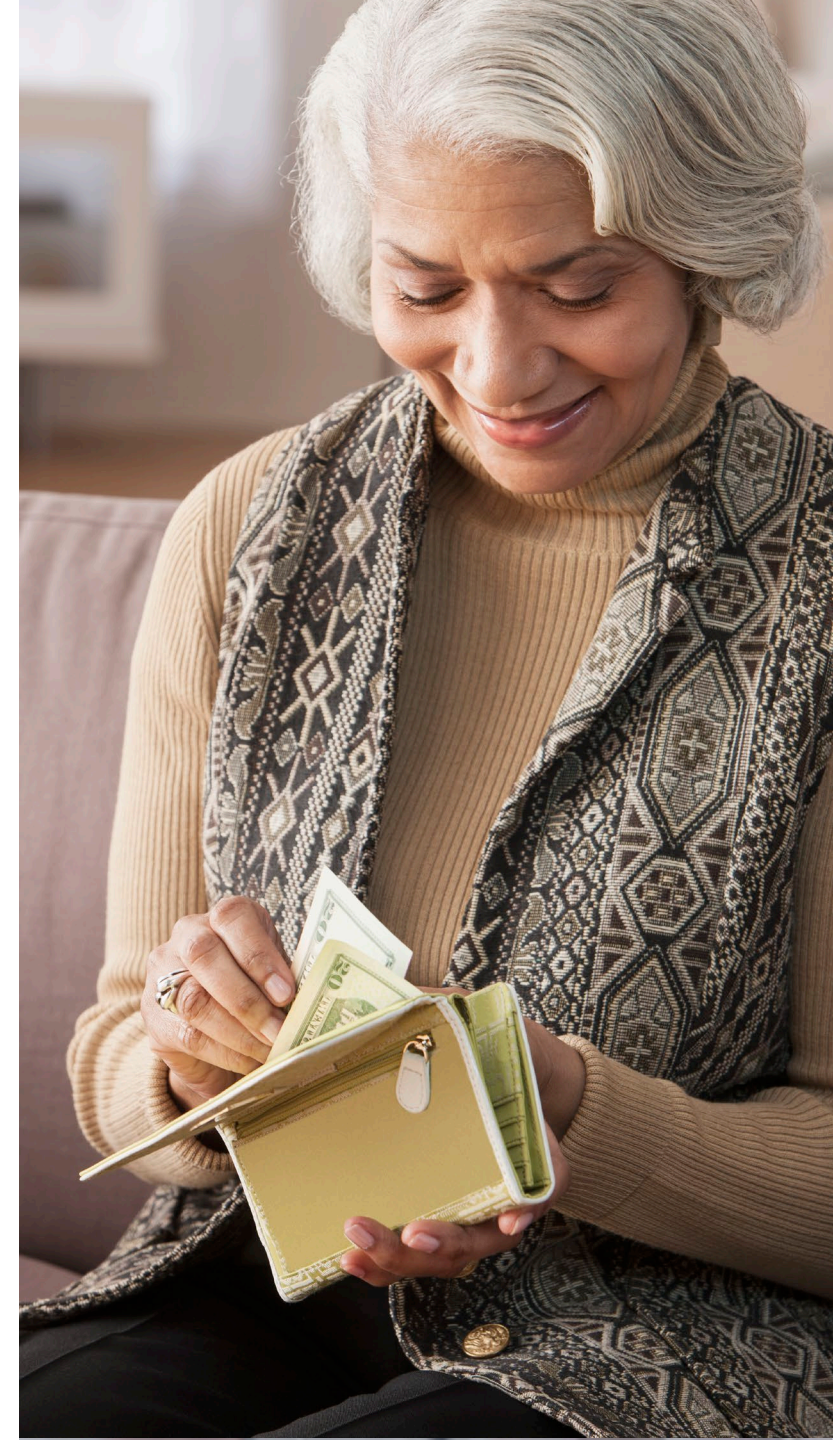
Beneficiary Receives Services at Other Facilities During Interruption

- If beneficiary receives services (under arrangement or not) at another facility during
 - **One-day** interruption
 - IPF responsible for such services
 - Follow under arrangements policy
 - We won't pay other facilities
 - **Two-day or three-day interruption**
 - IPF not responsible for such services
 - We will pay other facilities
 - Other facilities bill us directly

Payment When Interrupted Stay Occurred

Payment When Interrupted Stay Occurs – Same IPF

- We make one payment for total LOS in same IPF
- Includes:
 - Original stay
 - Readmission/return stay
 - One-day interruptions
- Does not include:
 - Two-day interruptions (one day in OSC 74)
 - Three-day interruptions (two days in OSC 74)



Payment When Interrupted Stay Occurs – Different IPF

- We make two payments
 - One payment to first IPF
 - One payment to second IPF
 - Payment to second IPF affected
 - Stay considered continuous per [CR7044](#)
 - MAC adds VC 75 to apply variable per diem adjustment

What Should You Do Now

- Review resources slides
- Share information with other staff members
- Follow billing instructions IPF claims
- Develop and implement policies that ensure you submit claims correctly
- Attend future education for IPFs
- Ask questions

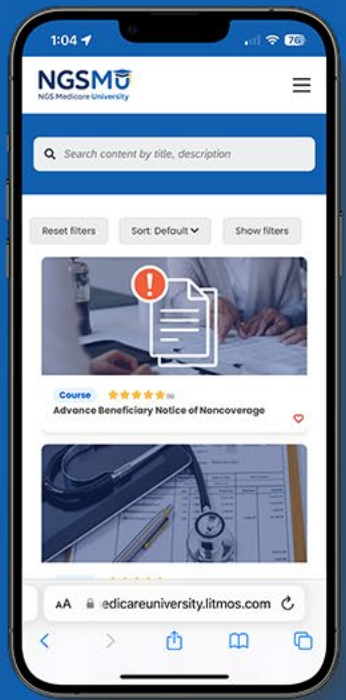
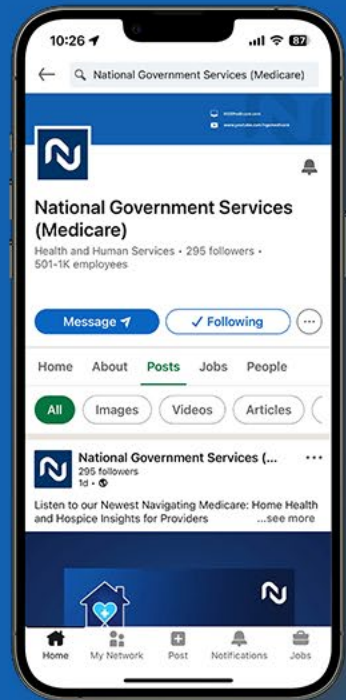
Resources

Resources

- [Inpatient Psychiatric Facility PPS](#)
- CMS IOM Publication 100-04, *Medicare Claims Processing Manual*
 - [Chapter 3, Sections 10.4, 190.7.1, 190.10.7 and 190.16](#)
 - [Chapter 25, Section 75](#)
- [CR6777 \(Transmittal 1946\) dated 4/15/2010, “Billing and Processing Claims with Unlimited Occurrence Span Codes \(OSCs\)”](#)
- [CR7044 \(Transmittal 2083\) dated 10/29/2010 “Implementation of the Interrupted Stay Policy Under the Inpatient Psychiatric Facility Prospective Payment System \(IPF PPS\)”](#)
- National Uniform Billing Committee (NUBC) members access billing codes from [NUBC’s UB-04 Data Specifications Manual](#)

Questions?

Thank you!



Connect with us on social media



[YouTube Channel](#)
Educational Videos

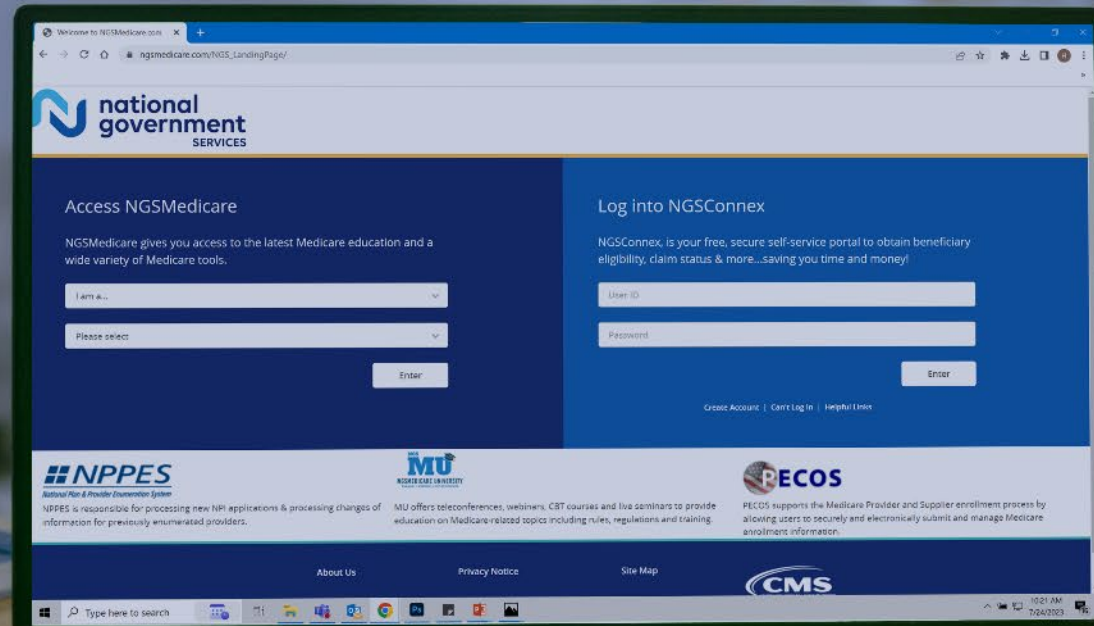


[Medicare University](#)
Self-paced online learning



[LinkedIn](#)
Educational Content

Find us online



www.NGS Medicare.com

Online resources, event calendar, LCD/NCD, and tools



[IVR System](#)

The interactive voice response system (IVR) is available 24-hours a day, seven days a week to answer general inquiries



[NGSConnex](#)

Web portal for claim information



[Sign up for Email Updates](#)

Subscribe for Email updates at the top of any NGS Medicare.com webpage to stay informed of news