



## **ADMISSIONCARE QUICK START GUIDE**



The patient status order classifies the acuity of the patient. The admitting provider is responsible to order the correct bed status and provide documentation to support the level of care.

- This is important to patients from a copay/deductible perspective and, if the patient requires post-acute placement, SNFs require a 3-day inpatient stay with qualifying medical necessity.
- By utilizing AdmissionCare at the time of admission decision, you can "get it right" upfront and avoid subsequent rework.

## How to Use AdmissionCare:

1 Launch point is in the Admission Navigator and ED Dispo Activity. Look for "AdmissionCare"



Search for a Guideline using the main reason for admit, principal diagnosis code, or procedure CPT. Start with Inpatient guidelines first and use Medical or Surgical type first before General (<u>Type of Guidelines tip sheet</u>)



(3) Criteria - Select criteria points that match patient's active condition at time of admit. This will describe the acuity of the patient. The selections will drive your patient status and documentation. Once you meet criteria, click blue button to send documentation.



Additional tip sheets linked in BLUE

- Determining the principal diagnosis will help with guideline
  - Less verbiage is better when searching.
- Follow the CARED Recommended workflow by reviewing INPT guidelines first.
  - Use this <u>INPT vs OBS</u> tip sheet to help determine appropriate bed status for your patient.
- 3. Criteria selection requires the condition to be active upon admission.
  - Do not use the presenting vitals/symptoms if resolved in
  - Example: if the patient has hypotension and the ED gives fluids and resolves the hypotension, this condition is no longer active.

- Criteria points have consistent language
- Example: "despite observation care" means a condition is persisting despite being in observation status (OBS order). These criteria are used to convert an OBS patient to INPT.

## 4. Document! Document! Document!

Be sure to include documentation that supports your patient's bed status and the criteria you selected in your

Medicare's two midnight rule is based on the expectation that a patient will stay over 2 midnights if admitted to inpatient.

- Again... documentation is key!
- Admission Criteria can help guide you based on medical necessity of the patient.





