

CRITICAL ACCESS HOSPITAL POLICY REVIEW FORM

DATA TAG	REQUIREMENT	COMMENTS
C-150	CONDITION OF PARTICIPATION COMPLIANCE WITH FEDERAL, STATE AND LOCAL LAW	
C-151	STANDARD: COMPLIANCE WITH FEDERAL LAWS AND REGULATIONS	
C-152	STANDARD: COMPLIANCE WITH STATE AND LOCAL LAWS AND REGULATIONS	
C-153	STANDARD: LICENSURE OF CAH – CAH IS LICENSED, CERTIFIED, REGISTERED IN ACCORD WITH APPLICABLE STATE & LOCAL LAWS AND REGULATIONS	
C-154	STANDARD: LICENSURE, CERTIFICATION, OR REGISTRATION OF STAFF IN ACCORD WITH STATE & LOCAL LAW	
C-160	CONDITION OF PARTICIPATION: STATUS AND LOCATION	
C-161	STANDARD: STATUS AS A CURRENTLY PARTICIPATING HOSPITAL....	
C-162	STANDARD: LOCATION IN A RURAL AREA OR TREATMENT AS RURAL	
C-165	STANDARD: LOCATION RELATIVE TO OTHER FACILITIES OR NECESSARY PROVIDERS	
C-166	STANDARD: RELOCATION OF THE CAH WITH THE NECESSARY PROVIDER DESIGNATION.	
C-167	STANDARD: OFF CAMPUS AND CO-LOCATION REQUIREMENTS	

CRITICAL ACCESS HOSPITAL POLICY REVIEW FORM

DATA TAG	REQUIREMENT	COMMENTS
C-170	CONDITION OF PARTICIPATION COMPLIANCE WITH CAH REQUIREMENTS AT THE TIME OF APPLICATION	
C-190	CONDITION OF PARTICIPATION: AGREEMENTS	
C-191	STANDARD: AGREEMENTS WITH NETWORK HOSPITALS	
C-193	STANDARD: THE DEVELOPMENT AND USE OF COMMUNICATIONS SYSTEMS OF THE NETWORK	
C-194	STANDARD: THE PROVISION OF EMERGENT & NON-EMERGENT TRANSPORTATION BETWEEN THE FACILITY AND THE HOSP.	
C-195	STANDARD: AGREEMENTS FOR CREDENTIALING AND QUALITY ASSURANCE	
C-200	CONDITION OF PARTICIPATION: EMERGENCY SERVICES	
C-201	STANDARD: AVAILABILITY OF 24 HOUR SERVICES	
C-202	STANDARD: EQUIPMENT, SUPPLIES, AND MEDICATIONS	
C-203	STANDARD: DRUGS & BIOLOGI USED IN LIFE-SAVING PROCEDURES INCLUDING ANALGESICS, LOCAL	
C-204	STANDARD: EQUIPMENT, SUPPLIES & MEDS AVAILABLE	

CRITICAL ACCESS HOSPITAL POLICY REVIEW FORM

DATA TAG	REQUIREMENT	COMMENTS
C-205	STANDARD: BLOOD AND BLOOD PRODUCTS	
C-206	STANDARD: BLOOD STORAGE FACILITIES THAT MEET THE REQUIREMENTS OF 42CFR PART 493 SUBPART K	
C-207	STANDARD: PERSONNEL AVAILABILITY WITHIN 30 MINUTES, 24 HOURS A DAY	
C-209	STANDARD: COORDINATION WITH EMERGENCY RESPONSE SYSTEM	
C-210	CONDITION OF PARTICIPATION: NUMBER OF BEDS AND LENGTH OF STAY	
C-211	STANDARD: NUMBER OF BEDS	
C-212	STANDARD: LENGTH OF STAY	
C-220	CONDITION OF PARTICIPATION: PHYSICAL PLANT AND ENVIRONMENT	
C-221	STANDARD: CONSTRUCTION	
C-222	STANDARD: MAINTENANCE	
C-223	STANDARD: THERE IS PROPER ROUTINE STORAGE AND PROMPT DISPOSAL OF TRASH	

CRITICAL ACCESS HOSPITAL POLICY REVIEW FORM

DATA TAG	REQUIREMENT	COMMENTS
C-224	STANDARD: DRUGS AND BIOLOGICALS ARE APPROPRIATELY STORED	
C-225	STANDARD: THE PREMISES ARE CLEAN AND ORDERLY	
C-226	STANDARD: THERE IS PROPER VENTILATION, LIGHTING, AND TEMPERATURE CONTROL IN ALL PHARMACEUTICAL, PATIENT CARE,	
C-227	STANDARD: EMERGENCY PROCEDURES	
C-228	STANDARD: PROVIDING FOR EMERGENCY POWER AND LIGHTING IN THE EMERGENCY ROOM AND BATTERY LAMPS.....	
C-229	STANDARD: PROVIDING FOR EMERGENCY FUEL AND WATER SUPPLY	
C-230	STANDARD: TAKING OTHER APPROPRIATE MEASURES THAT ARE CONSISTENT WITH THE PARTICULAR CONDITIONS..	
C-231	STANDARD LIFE SAFETY FROM FIRE	
C-234	STANDARD: THE CAH MAINTAINS WRITTEN EVIDENCE OF REGULAR INSPECTION AND APPROVAL BY STATE OR LOCAL	
C-235	STANDARD: A CRITICAL ACCESS CAH MUST BE IN COMPLIANCE WITH THE FOLLOWING PROVISIONS BEGINNING MARCH 31, 2006	
C-236	STANDARD: EXCEPTION #2 DOES NOT APPLY TO CRITICAL ACCESS HOSPITALS.	

CRITICAL ACCESS HOSPITAL POLICY REVIEW FORM

DATA TAG	REQUIREMENT	COMMENTS
C-237	STANDARD: INSTALLATION OF ALCOHOL BASED HAND SANITIZER DISPENSERS.	
C-240	CONDITION OF PARTICIPATION ORGANIZATIONAL STRUCTURE	
C-241	STANDARD GOVERNING BODY OR RESPONSIBLE INDIVIDUAL	
C-242	STANDARD THE CAH MUST DISCLOSE NAMES AND ADDRESSES OF THE OWNERS	
C-243	STANDARD CAH MUST DISCLOSE NAME AND ADDRESS OF PERSON RESPONSIBLE FOR OPERATION OF THE CAH	
C-244	STANDARD THE CAH MUST REPORT CHANGES OF THE PERSON RESPONSIBLE FOR MEDICAL DIRECTION OF THE CAH	
C-250	CONDITION OF PARTICIPATION THE CAH MUST ENSURE THAT STAFF AND STAFFING RESPONSIBILITIES REQUIREMENTS ARE MET	
C-251	STANDARD STAFFING: PROFESSIONAL HEALTH CARE STAFF INCLUDES ONE OR MORE MD, DO, PA-C, NP, OR CNS	
C-252	STANDARD STAFFING: ANY ANCILLARY PERSONNEL ARE SUPERVISED BY THE PROFESSIONAL STAFF	
C-253	STANDARD STAFFING: THE STAFF IS SUFFICIENT TO PROVIDE SERVICES ESSENTIAL TO THE OPERATION OF THE CAH	
C-254	STANDARD STAFFING: MD OR DO, NP, CNS, OR PA-C IS AVAILABLE TO FURNISH PT. CARE SERVICES AT ALL TIMES	

CRITICAL ACCESS HOSPITAL POLICY REVIEW FORM

DATA TAG	REQUIREMENT	COMMENTS
C-255	STANDARD A REGISTERED NURSE, CNS, OR LPN IS ON DUTY WHENEVER THE CAH HAS ONE OR MORE INPATIENTS	
C-256	STANDARD: RESPONSIBILITIES OF MD OR DO	
C-257	STANDARD: THE MD OR DO PROVIDES MEDICAL DIRECTION FOR THE CAH'S HEALTH CARE ACTIVITIES AND CONSULTATION FOR AND MEDICAL	
C-258	STANDARD: IN CONJUNCTION WITH THE PA AND/OR NP MEMBERS, PARTICIPATES IN DEVELOPING EXECUTING, AND PERIODICALLY	
C-259	STANDARD: IN CONJUNCTION WITH THE PA AND/OR NP MEMBERS, PERIODICALLY REVIEWS THE CAH'S PATIENT RECORDS, PROVIDES	
C-260	STANDARD: PERIODICALLY REVIEWS AND SIGNS THE RECORDS OF PATIENTS CARED FOR BY NP, CNS, AND PA'S	
C-261	STANDARD: AN MD OR DO IS PRESENT FOR SUFFICIENT PERIODS OF TIME AT LEAST ONCE EVERY 2 WEEK PERIOD TO PROVIDE MEDICAL DIRECTION	
C-262	STANDARD: PA, NP, AND CNS RESPONSIBILITIES	
C-263	STANDARD: THE PA, NP, OR CNS	
C-264	STANDARD: PA, NP, CNS RESPONSIBILITIES;	
C-265	STANDARD: THE PA, NP, OR CNS MEMBERS OF THE CAH STAFF MUST PARTICIPATE IN DEVELOPMENT, EXECUTION, & PERIODIC REVIEW OF	

CRITICAL ACCESS HOSPITAL POLICY REVIEW FORM

DATA TAG	REQUIREMENT	COMMENTS
C-266	STANDARD: PA, NP, CNS RESPONSIBILITIES: PERIODIC REVIEW OF PATIENT RECORDS.	
C-267	STANDARD: PA, NP, CNS RESPONSI- PA, NP, CNS PERFORMS SERVICES TO EXTENT NOT BY MD/DO; SERVICES PER CAH POLICIES	
C-268	STANDARD: PA, NP, CNS RESPONSIBILITIES; PA, NP, OR CNS MAY ADMIT BUT MUST SHOW MD/DO IS RESPONSIBLE FOR CARE	
C-269	STANDARD: PA, NP, CNS RESPONSIBILITIES; WHENEVER PT. IS ADMITTED TO THE CAH BY NP, PA, OR CNS, MD/DO IS NOTIFIED OF ADMIT	
C-270	CONDITION OF PARTICIPATION: PROVISION OF SERVICES	
C-271	STANDARD: PATIENT CARE POLICIES SERVICES FURNISHED ARE IN ACCORDANCE WITH WRITTEN POLICIES CONSISTENT WITH LAW	
C-272	STANDARD: POLICIES ARE DEVELOPED WITH ADVICE OF GROUP OF PROFESSIONAL PERSONNEL THAT INCLUDES AN MD AND A PA, NP, OR CNS.....	
C-273	STANDARD: THE POLICIES INCLUDE THE FOLLOWING; A DESCRIPTION OF SERVICES FURNISHED DIRECTLY BY THE CAH AND THOSE BY AGREEMENT	
C-274	STANDARD: POLICIES AND PROCEDURES FOR EMERGENCY MEDICAL SERVICES	
C-275	STANDARD: GUIDELINES FOR MANAGEMENT OF HEALTH PROBLEMS THAT INCLUDE CONDITIONS REQUIRING MEDICAL CONSULTATION AND/OR PATIENT REFERRAL.....	
C-276	STANDARD: RULES FOR STORAGE, HANDLING, DISPENSATION AND ADMINISTRATION OF DRUGS AND BIOLOGICALS	

CRITICAL ACCESS HOSPITAL POLICY REVIEW FORM

DATA TAG	REQUIREMENT	COMMENTS
C-277	STANDARD: PROCEDURES FOR REPORTING ADVERSE DRUG REACTIONS AND ERRORS IN ADMINISTRATION OF DRUGS	
C-278	STANDARD: PT. CARE POLICIES; A SYSTEM FOR IDENTIFYING, REPORTING, INVESTIGATING, AND CONTROLLING INFECTIONS AND COMMUNICABLE DISEASES	
C-279	STANDARD: PT CARE POLICIES; IF THE CAH FURNISHES INPATIENT SERVICES, PROCEDURES THAT ENSURE NUTRITIONAL NEEDS ARE MET	
C-280	STANDARD: PT. CARE POLICIES; THESE POLICIES ARE REVIEWED AT LEAST ANNUALLY BY THE GROUP OF PROFESSIONAL PERSONNEL	
C-281	STANDARD: DIRECT SERVICES; THE CAH FURNISHES AS DIRECT SERVICES THOSE DIAGNOSTIC AND...	
C-282	STANDARD: DIRECT SERVICES; LABORATORY SERVICES	
C-283	STANDARD: DIRECT SERVICES; RADIOLOGY SERVICES	
C-284	STANDARD: DIRECT SERVICES; EMERGENCY PROCEDURES	
C-285	STANDARD: SERVICES PROVIDED THROUGH AGREEMENTS OR ARRANGEMENTS;	
C-286	STANDARD: SERVICES PROVIDED THROUGH AGREEMENTS OR ARRANGEMENTS; INPATIENT CAH CARE	
C-287	STANDARD: SERVICES PROVIDED THROUGH AGREEMENTS OR ARRANGEMENTS; SERVICES OF MD OR DO	

CRITICAL ACCESS HOSPITAL POLICY REVIEW FORM

DATA TAG	REQUIREMENT	COMMENTS
C-288	STANDARD: SERVICES PROVIDED THROUGH AGREEMENTS OR ARRANGEMENTS; ADDITIONAL OR SPECIALIZED DIAGNOSTIC AND CLINICAL LAB	
C-289	STANDARD: SERVICES PROVIDED THROUGH AGREEMENTS OR ARRANGEMENTS; FOOD OR OTHER SERVICES TO MEET	
C-290	STANDARD: SERVICES PROVIDED THROUGH AGREEMENTS OR ARRANGEMENTS; IF AGREEMENTS OR ARRANGEMENTS NOT IN WRITING,	
C-291	STANDARD: SERVICES PROVIDED THROUGH AGREEMENTS OR ARRANGEMENTS; THE CAH MAINTAINS A LIST OF ALL SERVICES	
C-292	STANDARD: SERVICES PROVIDED THROUGH AGREEMENTS OR ARRANGEMENTS; THE PERSON PRINCIPALLY RESPONSIBLE FOR THE	
C-293	STANDARD: SERVICES PROVIDED THROUGH AGREEMENTS OR ARRANGEMENTS; ENSURING A CONTRACTOR OF SERVICES PROVIDES	
C-294	STANDARD: NURSING SERVICES; NURSING SERVICES MUST MEET THE NEEDS OF THE PATIENTS	
C-295	STANDARD: NURSING SERVICES ;A REGISTERED NURSE MUST PROVIDE OR ASSIGN NURSING CARE OF EACH PATIENT INCLUDING SNF LEVEL OF	
C-296	STANDARD: NURSING SERVICES A REGISTERED NURSE OR WHERE PERMITTED, A PA MUST SUPERVISE AND EVALUATE NURSING CARE OF EACH PATIENT	
C-297	STANDARD: NURSING SERVICES; ALL DRUGS, BIOLOGICALS, AND IV MEDICATIONS MUST BE ADMINISTERED BY OR UNDER	
C-298	STANDARD: NURSING SERVICES; A NURSING CARE PLAN MUST BE DEVELOPED AND KEPT CURRENT FOR EACH INPATIENT	

CRITICAL ACCESS HOSPITAL POLICY REVIEW FORM

DATA TAG	REQUIREMENT	COMMENTS
C-300	CONDITION OF PARTICIPATION: CLINICAL RECORDS	
C-301	STANDARD: RECORDS SYSTEM; THE CAH MAINTAINS A RECORD SYSTEM IN ACCORDANCE WITH WRITTEN POLICIES	
C-302	STANDARD: RECORDS SYSTEM; THE RECORDS ARE LEGIBLE, COMPLETE, ACCURATELY DOCUMENTED, READILY ACCESSIBLE	
C-303	STANDARD: RECORDS SYSTEM; A DESIGNATED MEMBER OF THE PROFESSIONAL STAFF IS RESPONSIBLE FOR MAINTAINING THE RECORDS AND	
C-304	STANDARD: RECORDS SYSTEM; FOR EACH PATIENT RECEIVING HEALTH CARE SERVICES, THE CAH MAINTAINS A RECORD THAT	
C-305	STANDARD: RECORDS SYSTEM; REPORTS OF PHYSICAL EXAMINATIONS, DIAGNOSTIC & LAB TESTS.....	
C-306	STANDARD: RECORDS SYSTEM; ALL ORDERS OF MD/DO OR OTHER PRACTITIONERS. TX & MED REPORTS, NURSES NOTES AND DOCUMENTS	
C-307	STANDARD: RECORDS SYSTEM; DATED SIGNATURES OF THE MD/DO OR OTHER PRACTITIONERS	
C-308	STANDARD: PROTECTION OF RECORD INFO; CAH MAINTAINS CONFIDENTIALITY OF RECORD INFO AND SAFETY	
C-309	STANDARD: PROTECTION OF RECORD INFO; WRITTEN P&P GOVERN USE AND REMOVAL OF RECORDS FROM THE CAH	
C-310	STANDARD: PROTECTION OF RECORD INFO; THE PATIENTS WRITTEN CONSENT IS REQUIRED FOR RELEASE OF INFORMATION	

CRITICAL ACCESS HOSPITAL POLICY REVIEW FORM

DATA TAG	REQUIREMENT	COMMENTS
C-311	STANDARD: RETENTION OF RECORDS; RECORDS ARE RETAINED FOR AT LEAST 6 YEARS FROM LAST ENTRY	
C-320	CONDITION OF PARTICIPATION: SURGICAL SERVICES	
C-321	STANDARD: DESIGNATION OF QUALIFIED PRACTITIONERS; THE CAH DESIGNATES THE PRACTITIONERS ALLOWED TO	
C-322	STANDARD: ANESTHETIC RISK AND EVALUATION: ANESTHETIC RISK AND EVALUATION DONE BY QUALIFIED PRACTITIONER	
C-323	STANDARD: ADMINISTRATION OF ANESTHESIA THE CAH DESIGNATES THE PERSON ALLOWED TO ADMINISTER ANESTH	
C-324	STANDARD: ADMINISTRATION OF ANESTHESIA; IN CASES WHERE CRNA ADMINISTERS, ANESTHETIST MUST BE UNDER SUPERVISION OF OPERATING	
C-325	STANDARD: DISCHARGE ALL PATIENTS MUST BE DISCHARGED IN THE COMPANY OF A RESPONSIBLE ADULT	
C-326	STANDARD: STATE EXEMPTION FOR CRNA	
C-330	CONDITION OF PARTICIPATION: PERIODIC EVALUATION AND QUALITY ASSURANCE REVIEW	
C-331	STANDARD: PERIODIC EVALUATION; THE CAH CARRIES OUT OR ARRANGES FOR A PERIODIC EVALUATION OF TOTAL PROGRAM YEARLY,	
C-332	STANDARD: PERIODIC EVALUATION; UTILIZATION OF CAH SERVICES INCLUDING AT LEAST THE NUMBER OF PATIENTS SERVED AND	

CRITICAL ACCESS HOSPITAL POLICY REVIEW FORM

DATA TAG	REQUIREMENT	COMMENTS
C-333	STANDARD: PERIODIC EVALUATION; A REPRESENTATIVE SAMPLE OF BOTH ACTIVE AND CLOSED RECORDS	
C-334	STANDARD: PERIODIC EVALUATION; THE CAHS HEALTH CARE POLICIES	
C-335	STANDARD: PERIODIC EVALUATION; THE PURPOSE OF THE EVALUATION IS TO DETERMINE WHETHER UTILIZATION OF SERVICES WAS APPR	
C-336	STANDARD: QA The CAH has an effective QA program to evaluate quality and appropriateness of care	
C-337	STANDARD: QA All patient care services and other services affecting patient health and safety are evaluated	
C-338	STANDARD: QA; Nosocomial infections and medication therapy are evaluated.	
C-339	STANDARD: QA Quality and appropriateness of Dx and Tx furnished by NP, CNS, and PA's at the CAH are evaluated by MD/DO	
C-340	STANDARD: QA Quality and appropriateness of Dx and Tx by MD/DO are evaluated by a network member hosp. or QIO, or other appropriate entity	
C-341	STANDARD: QA The CAH staff considers the findings or recommendations of the QIO and takes corrective action if necessary.	
C-342	STANDARD: QA The CAH also takes appropriate remedial action to address deficiencies found thru the QA program	
C-343	STANDARD: QA The CAH documents the outcome of all remedial action.	

CRITICAL ACCESS HOSPITAL POLICY REVIEW FORM

DATA TAG	REQUIREMENT	COMMENTS
C-344	CONDITION OF PARTICIPATION; ORGAN, TISSUE AND EYE PROCUREMENT. The CAH must have written protocols that-	
C-345	STANDARD: ORGAN, TISSUE, EYE PROCUREMENT; Incorporates an agreement with an OPO designated under part 486 with notification of OPO for individuals whose	
C-346	STANDARD: ORGAN, TISSUE, EYE PROCUREMENT; Incorporate an agreement with at least 1 tissue bank and 1 eye bank to cooperate in	
C-347	STANDARD: ORGAN, TISSUE, EYE PROCUREMENT; Ensure in collaboration with the designated OPO that the family of each potential donor is informed of it's option	
C-348	STANDARD: ORGAN, TISSUE, EYE PROCUREMENT; Encourage discretion and sensitivity with respect to the circumstances, views, and beliefs of the family of potential	
C-349	STANDARD: ORGAN, TISSUE, EYE PROCUREMENT; Ensure that the CAH works cooperatively with the designated OPO, tissue and eye bank in educating staff on	
C-350	CONDITION OF PARTICIPATION: SPECIAL REQS FOR CAH PROVIDERS OF LTC SERVICES (SWING BEDS)	
C-351	STANDARD: ELIGIBILITY; The CAH must meet the following requirements; Cert as a CAH. and meets 25 bed limit.	
C-352	STANDARD: Facilities participating as Rural Primary Care Hospitals Participation as a RPCH, or CAH w swing beds	
C-355	STANDARD: PAYMENT; Payment for inpatient RPCH services to a CAH that has qualified as a CAH under the provisions of 413.70	
C-360	STANDARD: SNF SERVICES The CAH is substantially in compliance with the following SNF requirements;	

CRITICAL ACCESS HOSPITAL POLICY REVIEW FORM

DATA TAG	REQUIREMENT	COMMENTS
C-361	STANDARD: RESIDENT RIGHTS (MIMIC LTCC REGS) The resident has the right to a dignified existence.	
C-362	STANDARD: RESIDENT RIGHTS; Right to refuse treatment, to refuse to participate in experimental research, to formulate an advanced directive	
C-363	STANDARD: RESIDENT RIGHTS; The facility must inform each resident entitled to Medicaid in writing, of item and services included in state plan...	
C364	STANDARD: RESIDENT RIGHTS; FREE CHOICE; The resident has the right to choose a personal physician	
C365	STANDARD: RESIDENT RIGHTS; Be informed in advance about care and treatment, and about any changes in treatment....	
C366	STANDARD: RESIDENT RIGHTS; Unless adjudged incompetent, participate in planning care and treatment.....	
C367	STANDARD: RESIDENT RIGHTS; PRIVACY & CONFIDENTIALITY The resident has the right to personal privacy and confidentiality of person and records.	
C368	STANDARD: RESIDENT RIGHTS; Has the right to refuse to perform, or to perform services for the facility.	
C369	STANDARD: RESIDENT RIGHTS; Has the right to privacy in written communication including the right to send and receive mail.	
C370	STANDARD: RESIDENT RIGHTS; ACCESS & VISITATION RIGHTS; The resident has the right to deny or restrict visitation by family or others...	
C371	STANDARD: RESIDENT RIGHTS; The resident has the right to retain and use personal property.	

CRITICAL ACCESS HOSPITAL POLICY REVIEW FORM

DATA TAG	REQUIREMENT	COMMENTS
C372	STANDARD: RESIDENT RIGHTS; The resident has the right to share a room with his/her spouse when married couples in same facility consent to share...	
C373	STANDARD: ADMISSION, TRANSFER & DISCHARGE RIGHTS;	
C374	STANDARD: TRANSFER & DISCHARGE- The facility must allow the resident to remain in the facility and not transfer unless...	
C376	STANDARD: DOCUMENTATION; When the facility transfers or discharges a resident..., the documentation must be made by....	
C377	STANDARD: NOTICE BEFORE TRANSFER; The notice before transfer must notify the resident and if known, a family member or legal rep. the reasons for the	
C378	STANDARD: TIMING OF THE NOTICE; The notice of transfer/discharge must be made by the facility at least 30 days prior to the residents transfer/discharge	
C379	STANDARD: CONTENTS OF NOTICE; The notice must contain the following information; reason for trans/disch., effective date, location to,....	
C380	STANDARD: ORIENTATION FOR DISCHARGE; The facility must provide sufficient preparation and orientation for transfer/discharge	
C381	STANDARD: RESTRAINTS The resident has the right to be free from any physical or chemical restraints imposed for...	
C382	STANDARD: ABUSE; The resident has the right to be free from verbal, sexual, physical, and mental abuse, corporal punishment and invol. secl.	
C383	STANDARD: STAFF TREATMENT OF RESIDENTS; The facility must develop and implement P&P that prohibit mistreatment of residents.....	

CRITICAL ACCESS HOSPITAL POLICY REVIEW FORM

DATA TAG	REQUIREMENT	COMMENTS
C384	STANDARD: STAFF TREATMENT OF RESIDENTS; The facility must not employ individuals who have been-	
C385	STANDARD: PATIENT ACTIVITIES; The facility must provide for an ongoing program of activities designed to meet in accordance with comp. assessment...	
C386	STANDARD: SOCIAL SERVICES. The facility must provide medically related social services to attain or maintain.....	
C388	STANDARD: RESIDENT ASSESSMENT The facility must conduct initially and periodically a comprehensive, accurate, standardized assessment	
C389	STANDARD: TIME FRAMES FOR ASSESSMENT; the facility must conduct a comprehensive assessment within 14 days of admission..	
C390	STANDARD: FREQUENCY OF ASSESSMENTS; Within 14 days of a significant change.....	
C395	STANDARD: COMPREHENSIVE CARE PLANS; The facility must develop a comprehensive care plan for each resident that includes...	
C396	STANDARD: COMPREHENSIVE CARE PLANS; A comprehensive care plan must be developed within 7 days of completion of comp. assessment.....	
C397	STANDARD: SERVICES PROVIDED; The services provided or arranged must meet professional standards of quality	
C398	STANDARD: SERVICES PROVIDED; Be provided by qualified persons in accordance with each residents written plan of care.	
C399	STANDARD: DISCHARGE SUMMARY: When the facility anticipates discharge, the resident must have a discharge summary.....	

CRITICAL ACCESS HOSPITAL POLICY REVIEW FORM

DATA TAG	REQUIREMENT	COMMENTS
C400	STANDARD: NUTRITION; Based on the residents assessment, the facility must ensure....	
C401	STANDARD: NUTRITION; Receives a therapeutic diet when there is a nutritional problem.	
C402	STANDARD: SPECIALIZED REHAB SERVICES: Provision of specialized services (PT, OT, ST, MI, MR, etc.), if required, are provided or arranged	
C403	STANDARD: SPEC. REHAB QUALIF: The specialized rehab services must be provided under a written order of MD/DO by qualified personnel	
C404	STANDARD: DENTAL SERVICES: The facility must assist residents in obtaining routine and emergent dental care.	
C405	STANDARD: DENTAL SERVICES IN SKILLED NURSING FACILITIES: A SNF must obtain or provide from an outside resource, routine or emergent dental care	
C406	STANDARD: DENTAL SERVICES; Must assist in making appointments and arranging transportation to dental office	
C407	STANDARD: DENTAL SERVICES; NURSING FACILITIES: must obtain or provide from an outside resource, routine or emergent dental care	
C408	STANDARD: DENTAL SERVICES; Must assist in making appointments and arranging transportation to dental office, promptly refer residents with lost or damaged dentures.	
C-500	CONDITION OF PARTICIPATION: PSYCH & REHAB DISTINCT PART UNITS;	
C-501	STANDARD: ELIGIBILITY REQUIREMENTS; To be able to receive Medicare payments for psychiatric or rehabilitation services as a distinct part unit..	

14

CRITICAL ACCESS HOSPITAL POLICY REVIEW FORM

DATA TAG	REQUIREMENT	COMMENTS
C-504	STANDARD: ADMISSION CRITERIA; A psych unit must have written admission criteria that are applied uniformly to both Medicare and non-Medicare patients...	
C-505	STANDARD: SEPARATE MEDICAL RECORDS; A psych unit must have admit & disch records that are separately identified from those of the hospital...	
C-506	STANDARD: POLICIES; A psych unit must have policies specifying that necessary clinical information is transferred to the unit when a hospital pt....	
C-507	STANDARD: STATE LICENSURE; A psych unit must meet applicable state licensure laws.	
C-508	STANDARD: UTILIZATION REVIEW; A psych unit must have UR standards applicable for the type of care provided.	
C-509	STANDARD: SEPARATE BEDS; A psych unit must have beds physically separate from the hospital's other beds.	
C-510	STANDARD: FISCAL INTERMEDIARY; A psych unit must be serviced by the same fiscal intermediary.	
C-511	STANDARD: SEPARATE COST CENTER; A psych unit must be treated as a separate cost center for cost finding.....	
C-512	STANDARD: ACCOUNTING SYSTEM; A psych unit must use an accounting system that properly allocates costs.	
C-513	STANDARD: MAINTAIN ALLOCATION DATA; A psych unit must maintain adequate statistical data support the basis of allocation.	
C-514	STANDARD: FISCAL PERIOD; A psych unit must report its costs in the hospital cost report covering the same fiscal period and using same method of.....	

CRITICAL ACCESS HOSPITAL POLICY REVIEW FORM

DATA TAG	REQUIREMENT	COMMENTS
C-515	STANDARD: FULLY EQUIPPED & STAFFED; A psych unit must, as of the first day of the cost reporting period..., be fully equipped, staffed, and capable of providing	
C-516	STANDARD: INCREASE IN SIZE; For purposes of exclusion from the prospective payment system...,changes in # of beds and sq.footage	
C-517	STANDARD: DECREASE IN SIZE; The number of beds and sq. Footage of an excluded unit may be decreased at any time during a cost reporting period....	
C-518	STANDARD: RELOCATION OF UNIT; The number of beds and/or sq. footage of a unit may be increased or decreased at any time if changes necessary because of relocation...	
C519	STANDARD: CHANGES IN STATUS OF A UNIT; The status of a unit from excluded to non-excluded may only be changed at the start of	
C-520	STANDARD: 30 DAY NOTICE; The status of a unit can be changed any time during the cost reporting period only if the hospital notifies the FI and CMS RO 30 days	
C521	STANDARD: NUMBER OF UNITS; A hospital may have only one unit of each type excluded from the prospective payment system.	
C-522	STANDARD: SATELLITES-DEFINITION; For purposes of this section, a satellite facility is a part of a hospital unit that provides inpt. services in a building....	
C-523	STANDARD: SATELLITES-NUMBER OF BEDS;	
C-524	STANDARD: SATELLITES-ADMISSION CRITERIA;	
C-525	STANDARD: SATELLITES-INDEPENDENT STAFF;	

CRITICAL ACCESS HOSPITAL POLICY REVIEW FORM

DATA TAG	REQUIREMENT	COMMENTS
C-526	STANDARD: SATELLITES-SEPARATE RECORDS;	
C-527	STANDARD: SATELLITES- SEPARATE BEDS;	
C-528	STANDARD: SATELLITES-FISCAL INTERMEDIARY;	
C-529	STANDARD: SATELLITES-COST CENTER;	
C-530	STANDARD: SATELLITES-MAINTAIN DATA;	
C-531	STANDARD: SATELLITES-FISCAL PERIOD;	
C-532	STANDARD: SATELLITE FACILITIES;	
C-533	STANDARD: SATELLITES-RELOCATION;	
C-535	STANDARD: CHANGES IN CLASSIFICATION;	
C-547	STANDARD: ADMISSIONS; A psych unit must admit only patients requiring active treatment....	
C-548	STANDARD: QUALIFIED PERSONNEL; A psych unit must furnish, through the use of qualified personnel, psychological services, social work services.....	

CRITICAL ACCESS HOSPITAL POLICY REVIEW FORM

DATA TAG	REQUIREMENT	COMMENTS
C-549	STANDARD: MEDICAL RECORDS; A psych unit must maintain records that permit determination of the degree and intensity of the treatment provided...	
C-550	STANDARD: INPATIENT LEGAL STATUS; Identification data must include patient legal status.	
C-551	STANDARD: ADMITTING DIAGNOSIS;	
C-552	STANDARD: REASON FOR ADMISSION;	
C-553	STANDARD: SOCIAL SERVICE RECORDS;	
C-554	STANDARD: NEUROLOGICAL EXAMINATION;	
C-555	STANDARD: PSYCHIATRIC EVALUATION;	
C-556	STANDARD: MEDICAL HISTORY;	
C-557	STANDARD: MENTAL STATUS;	
C-558	STANDARD: ONSET OF ILLNESS	
C559	STANDARD: ATTITUDE AND BEHAVIOR;	

CRITICAL ACCESS HOSPITAL POLICY REVIEW FORM

DATA TAG	REQUIREMENT	COMMENTS
C-560	STANDARD: INTELLECTUAL FUNCTIONING;	
C-561	STANDARD: INPATIENT'S ASSETS;	
C-562	STANDARD: TREATMENT PLAN-DIAGNOSIS;	
C-563	STANDARD: TREATMENT PLAN-GOALS;	
C-564	STANDARD: TREATMENT PLAN-MODALITIES;	
C-565	STANDARD: TREATMENT PLAN-TEAM;	
C-566	STANDARD: TREATMENT PLAN-DOCUMENTATION;	
C-567	STANDARD: TREATMENT PLAN-THERAPY;	
C-568	STANDARD: PROGRESS NOTES-MD/DO;	
C-569	STANDARD: PROGRESS NOTES-NURSE	
C-570	STANDARD: PROGRESS NOTES-SOCIAL WORKER;	

CRITICAL ACCESS HOSPITAL POLICY REVIEW FORM

DATA TAG	REQUIREMENT	COMMENTS
C-571	STANDARD: PROGRESS NOTES-OTHERS;	
C-572	STANDARD: PROGRESS NOTES-FREQUENCY;	
C-573	STANDARD: PROGRESS NOTES-REVISIONS;	
C-574	STANDARD: DISCHARGE SUMMARY;	
C-575	STANDARD: DISCHARGE PLANNING-FOLLOW UP;	
C-576	STANDARD: CONDITION ON DISCHARGE;	
C-577	STANDARD: ADEQUATE NUMBER OF STAFF;	
C-578	STANDARD: ADEQUATE TYPES OF PERSONNEL;	
C-579	STANDARD: DIRECTOR;	
C-580	STANDARD: MEDICAL DOCTORS;	
C-581	STANDARD: CLINICAL DIRECTOR;	

CRITICAL ACCESS HOSPITAL POLICY REVIEW FORM

DATA TAG	REQUIREMENT	COMMENTS
C-582	STANDARD: QUALITY OF SERVICES;	
C-583	STANDARD: NURSING DIRECTOR;	
C-584	STANDARD: NUMBERS OF NURSING STAFF;	
C-585	STANDARD: DON QUALIFICATIONS;	
C-586	STANDARD: DON COMPETENCE;	
C-587	STANDARD: RN REQUIREMENT;	
C-588	STANDARD: STAFF FOR NURSING CARE;	
C-589	STANDARD: PSYCHOLOGICAL SERVICES; The unit must provide psych services to meet the needs of the patients.	
C-590	STANDARD: PSYCHOLOGICAL SERVICES; The services must be furnished in accordance with acceptable standards of practice.....	
C-591	STANDARD: SOCIAL SERVICES DIRECTOR;	
C-592	STANDARD: SOCIAL SERVICES;	

CRITICAL ACCESS HOSPITAL POLICY REVIEW FORM

DATA TAG	REQUIREMENT	COMMENTS
C-593	STANDARD: SOCIAL SERVICES RESPONSIBILITIES;	
C-594	STANDARD: THERAPEUTIC ACTIVITIES;	
C-595	STANDARD: ACTIVITIES PROGRAM;	
C-596	STANDARD: ACTIVITIES STAFF;	
C-700	CONDITION OF PARTICIPATION: PSYCH & REHAB DISTINCT PART UNITS-REHAB.	
C-701	STANDARD: ELIGIBILITY REQUIREMENTS;	
C-704	STANDARD: ADMISSION CRITERIA;	
C-705	STANDARD: SEPARATE MEDICAL RECORDS;	
C-706	STANDARD: POLICIES;	
C-707	STANDARD: STATE LICENSURE;	
C-708	STANDARD: UTILIZATION REVIEW;	

CRITICAL ACCESS HOSPITAL POLICY REVIEW FORM

DATA TAG	REQUIREMENT	COMMENTS
C-709	STANDARD: SEPARATE BEDS;	
C-710	STANDARD: FISCAL INTERMEDIARY;	
C-711	STANDARD: SEPARATE COST CENTER;	
C-712	STANDARD: ACCOUNTING SYSTEM;	
C-713	STANDARD: MAINTAIN ALLOCATION DATA;	
C-714	STANDARD: FISCAL PERIOD;	
C-715	STANDARD: FULLY EQUIPPED AND STAFFED;	
C-716	STANDARD: INCREASE IN SIZE;	
C-717	STANDARD: DECREASE IN SIZE;	
C-718	STANDARD: RELOCATION OF A UNIT;	
C-719	STANDARD: CHANGE IN STATUS OF A UNIT;	

CRITICAL ACCESS HOSPITAL POLICY REVIEW FORM

DATA TAG	REQUIREMENT	COMMENTS
C-720	STANDARD: 30 DAY NOTICE;	
C-721	STANDARD: NUMBER OF UNITS;	
C-722	STANDARD: SATELLITES-DEFINITION;	
C-723	STANDARD: SATELLITES-NUMBER OF BEDS;	
C-724	STANDARD: SATELLITES-ADMISSION CRITERIA;	
C-725	STANDARD: SATELLITES-INDEPENDENT STAFF;	
C-726	STANDARD: SATELLITES-SEPARATE RECORDS;	
C-727	STANDARD: SATELLITES-SEPARATE BEDS;	
C-728	STANDARD: SATELLITES-FISCAL INTERMEDIARY;	
C-729	STANDARD: SATELLITES-COST CENTER;	
C-730	STANDARD: SATELLITES-MAINTAIN DATA;	

CRITICAL ACCESS HOSPITAL POLICY REVIEW FORM

DATA TAG	REQUIREMENT	COMMENTS
C-731	STANDARD: SATELLITES-FISCAL PERIOD;	
C-732	STANDARD: SATELLITE FACILITIES;	
C-733	STANDARD: SATELLITES-RELOCATION;	
C-734	STANDARD: SATELLITE FACILITIES;	
C-735	STANDARD: CHANGES IN CLASSIFICATION;	
C-747	STANDARD: NEW VS CONVERTED UNITS;	
C-748	STANDARD: PREADMISSION SCREENING;	
C-749	STANDARD: REHABILITATION NURSING;	
C-750	STANDARD: PHYSICAL & OCCUPATIONAL THERAPY;	
C-751	STANDARD: OTHER SERVICES;	
C-752	STANDARD: PLAN OF TREATMENT;	

CRITICAL ACCESS HOSPITAL POLICY REVIEW FORM

DATA TAG	REQUIREMENT	COMMENTS
C-753	STANDARD: MULTIDISCIPLINARY TEAM;	
C-754	STANDARD: TEAM CONFERENCES;	
C-755	STANDARD: DIRECTOR;	
C-756	STANDARD: DIRECTOR MD/DO;	
C-757	STANDARD: DIRECTOR-LICENSED;	
C-758	STANDARD: DIRECTOR-TRAINING & EXPERIENCE;	
C-770	STANDARD: DECREASE IN BEDS;	
C-771	STANDARD: DELICENSED/DECERTIFIED BEDS;	
C-772	STANDARD: NEW UNITS;	
C-773	STANDARD: WRITTEN CERTIFICATION; A hosp. that seeks exclusion of a new rehab unit may provide a written certification that the inpatient	
C-774	STANDARD: WRITTEN CERTIFICATION; The written certification is effective for the first full cost reporting period during which the unit is used	

CRITICAL ACCESS HOSPITAL POLICY REVIEW FORM

DATA TAG	REQUIREMENT	COMMENTS
C-775	STANDARD: WRITTEN CERTIFICATION; For a not previously participating hospital....	
C-776	STANDARD: CHANGE OF OWNERSHIP;	
C-777	STANDARD: CONVERTED UNITS;	
C-778	STANDARD: EXPANSION OF UNITS;	
C-779	STANDARD: CONVERSION OF BEDS;	
C-780	STANDARD: INCREASE IN SIZE;	
C-781	STANDARD: RETROACTIVE ADJUSTMENTS;	
C-9999	FINAL OBSERVATIONS;	