**Federal Guidelines**

Medicare, the federal government, and other government and commercial insurers, require your medical team and hospital to determine the correct billing status for your hospital stay based on your illness, the expected monitoring and treatment that will be provided, and your expected length of stay. Your hospitalization will be classified as either an outpatient observation or inpatient admission, which is determined by federal rules, regulations and clinical protocols.

A patient’s condition must meet certain criteria in order to be admitted as an inpatient.
1. The condition/illness must meet a certain level of seriousness.
2. The treatment rendered must meet a certain level of intensity.
3. There must be an assumption that you will need to be in the hospital for two midnights or more.

**Billing**

An “outpatient observation” stay for Medicare patients is billed under Medicare Part B, which covers outpatient services. Based on the terms of your insurance policies, you may be responsible for co-pays and deductibles along with any additional costs. Ask Medicare or your insurance company about your financial obligations.

In addition to your bill from Howard County General Hospital, you will receive separate bills for professional services provided by physicians.
Your medical team has decided that you need to remain in the hospital for additional nursing care, monitoring and evaluation; so, you are being moved to a hospital bed where you will be more comfortable. This is called “outpatient observation” and allows your doctor to order the tests and procedures necessary to decide the appropriate plan for your care.

Observation Status
Although you will be placed in a standard hospital room and receive the same quality care as an inpatient, you will continue to be charged as an outpatient. A patient stay in outpatient observation is generally less than 48 hours.

During this time, the medical team uses a focused approach to evaluate you in a timely manner and determine if you need to be hospitalized or if you can safely return home after care is provided to you in observation. Please note that if you take daily medication at home, for your safety, the hospital pharmacy must provide the same or similar medicine while you are in observation. You will be charged for that medication. You should not bring medication from home. This applies to both prescription and non-prescription medications.

If your condition worsens, or does not improve and requires inpatient care, you will be admitted to the hospital and your status will change from outpatient observation to inpatient status, consistent with your provider’s orders.

If your condition improves or can be managed outside of the hospital, you will be able to return home with instructions to follow up with a doctor.

Skilled Nursing Care
Please note that “outpatient observation” stays and “extended surgical recovery” stays, which is also an outpatient status, do not count toward the three-day qualifying inpatient stay required for Medicare Part A coverage of a skilled nursing facility after discharge.

We know that a hospital stay of any kind can be a stressful experience and that insurance coverage and rules can be confusing. If you have any questions, please ask your Case Manager.