

## Report on Medicare Compliance Volume 30, Number 38. October 25, 2021 Too Much Condition Code 44 Is a Sign of Getting It 'Wrong up Front'

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By Nina Youngstrom

John Zelem, M.D., a general surgeon turned consultant, is often asked whether all inpatient admissions must be reviewed by the hospital's utilization review (UR) committee. The answer, strictly with a regulatory hat on, is no. But it's not a bad idea to run as many admissions as possible by the UR committee because if it turns out they should be converted to observation services, using condition code 44 preserves a respectable amount of reimbursement and protects them in an audit, experts say. Hospitals must jump through condition code 44 hoops, however, before patients are discharged. Otherwise, Part A inpatients are converted to Part B inpatients after discharge using condition code W2, with far less reimbursement.

Either way, "too many condition code 44s tell us we are getting it wrong up front," said Zelem, CEO of Streamline Solutions Consulting Inc., at a webinar sponsored by RACmonitor.com Sept. 22.<sup>[1]</sup> "It could be a red flag for the institution."

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