

Report on Medicare Compliance Volume 31, Number 5. February 07, 2022 CMS Updates IM; Medicare Notices Shouldn't Be Delivered 'Just in Case'

By Nina Youngstrom

Case managers at Providence St. Joseph in Burbank, California, have their hands full at the moment with 25 discharged patients who have yet to be placed in a skilled nursing facility because of a lack of available beds in the area and another COVID-19 surge. Delivering the Important Message from Medicare (IM) isn't the first thing they think about.

"The IM is not always in the forefront of their minds," said Jane Winter, director of care management. It was just pushed there, however, because CMS updated the IM Jan. 21 in Medicare Transmittal 1120, and it has some helpful clarifications,^[1] she said. "It has always been a challenge making sure the IM is delivered on time and consistently."

Hospitals are required to give all Medicare and Medicare Advantage (MA) patients the IM, which informs inpatients of their hospital discharge appeal rights. IMs must almost always be delivered at least twice before discharge: once at registration and a second time no earlier than two days before discharge. In the transmittal, CMS clarifies that the second IM may be given as late as four hours before discharge, although patients don't have to hang around the hospital after they receive it if they don't plan to appeal their discharge to the quality improvement organization (QIO), said Ronald Hirsch, M.D., vice president of R1 RCM.

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