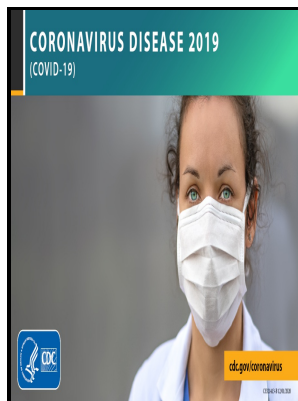


# Conditions of participation for extended care facilities.

U.S. Dept. of Health, Education, and Welfare, Social Security Administration ; [U.S. G.P.O.] - Federal :: Medicare and Medicaid Programs; Reform of Requirements for Long



Description: -

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Urease.

Enzymes.

Migrations of nations.

Nursing homes -- United States.

Older people -- Medical care -- United States. Conditions of participation for extended care facilities.

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HIM-3

Health insurance for the aged ; Conditions of participation for extended care facilities.

Notes: Title from cover.

This edition was published in 1966



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Tags: #Federal #: #Medicare #and #Medicaid #Programs; #Requirements #for #Long

## Long Term Care Facilities

Although we considered them, we do not specifically address all of those suggestions below. Start Printed Page 4528 Comment: Many commenters stated that HHAs should be explicitly permitted to discharge a patient for cause if the safety of the HHA's staff is threatened. This is particularly Start Printed Page 4518 necessary in situations where the representative legally possesses health care decision making authority.

## Urgent Care Centers: A Merging Trend in Health Care

The physician that is responsible for care of the condition that led to the initiation of home health care, and is thus the main physician responsible for the home health plan of care would have the opportunity to review all orders because all orders from all physicians must be included in the plan of care § 484.

## Federal :: Medicare and Medicaid Program: Conditions of Participation for Home Health Agencies

Source The provisions of this § 6210. We expect that information, such as the date the grievance was received and a summary statement of the resident's grievance, is included as a standard practice to ensure that the written decision is complete and informative. Public Comments by Regulatory Section.

## Medicare

Specifically, one commenter stated that in the preamble to the proposed rule, we explained that an HHA would need to notify a patient when the individualized plan of care is updated due to a significant change in the patient's health status. We have reviewed the language at e 2 , which sets forth requirements for the State Long-Term Care Ombudsman or the State agency to establish policies and procedures for timely access to facilities, residents, and appropriate records.

## Federal :: Medicare and Medicaid Programs; Requirements for Long

Comment: A few commenters suggested that licensed practitioners, such as nurse practitioners and physician assistants, should be permitted to review, sign and order home health services for patients served by Medicare certified HHAs.

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