

Place Logo & Facility Name & Address here

Medicare law requires Medicare Part A benefits be available to its enrollees for Religious Nonmedical Health Care Institutions (RNHCIs). This benefit applies to people with Part A who qualify for hospital or skilled nursing facility care, but medical care isn't in agreement with their religious beliefs. The RNHCI benefit, as a Part A benefit, must be made available to Medicare Advantage enrollees. This is made clear in statute, regulation, and the Medicare Managed Care Manual. Federal law, 42 U.S.C. § 1395w-22(a)(1); 42 C.F.R. § 422.101(a)

## Patient Submission Form

### Section A: Insurance Information

Today's Date:  
Patient name:  
Health Plan:  
Health Plan Type:  
Health Plan Member ID #:  
DOB:

### Section B: Facility Information

Facility Name:  
Facility Medicare #:  
Facility NPI:  
Date of Admission:  
Revenue Code: (enter revenue code(s) for range of dates)

### Section C: Coverage Criteria

**Medicare Part A** (Hospital Insurance) covers inpatient, non-religious, non-medical care when these conditions are met:

1. The RNHCI is currently certified to participate in Medicare. (See Facility Medicare # in Section B)
2. The RNHCI Utilization Review Committee (URC) agrees that patient would require skilled nursing facility care if they weren't in the RNHCI. (See Skilled Nursing Level of Care Criteria in Section E)
3. A written election stating that the need for RNHCI care is based on both eligibility and religious beliefs. The election must also state that if the patient decides to accept standard medical care, the RNHCI election will be cancelled and the patient may have to wait 1–5 years to be eligible for a new election to get RNHCI services. (See attached Election Form for Medicare)

<https://www.medicare.gov/coverage/rnhci-items-and-services.html>

### Section D: Patient Information

History (PMH):

**Some questions to address in your history**

- How independent was the person before admission?
- Does the patient live alone?
- Did patient require aides or CS nurses? Explain what caused the need for admission.
- Has this patient been under the care of a hospital or doctor? If so, state any information you have about that admission, etc.
- Why does patient need in-patient care rather than in-home care (Health plans need to understand why patient needs 24/7 in-patient care).
- Describe in detail what happened to cause the admission.
- Describe how the patient arrived at facility (via ambulance, family transported, etc.)

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**Medicare law requires Medicare Part A benefits be available to its enrollees for Religious Nonmedical Health Care Institutions (RNHCIs). This benefit applies to people with Part A who qualify for hospital or skilled nursing facility care, but medical care isn't in agreement with their religious beliefs. The RNHCI benefit, as a Part A benefit, must be made available to Medicare Advantage enrollees. This is made clear in statute, regulation, and the Medicare Managed Care Manual. Federal law, 42 U.S.C. § 1395w-22(a)(1); 42 C.F.R. § 422.101(a)**

**Admitting DX:** R69 - illness, unspecified; Z53.1 - procedure and treatment not carried out because of patient's decision for reasons of belief

**Identified Health Problems: (Whatever health problems you list, the care plan should address each one and include specifics for type of care given for each health problem)**

- 1.
- 2.
- 3.
- 4.
- 5.
- 6.
- 7.

**Vital Signs:** Not applicable

**Labs/Diagnostics:** Not applicable

**Levels of function:** Date: \_\_\_\_\_ Check in the appropriate box to indicate current level of function.

	Independent	Supervision /Oversight No physical contact	Light physical contact Less than 5% staff effort	Minimum Assistance 25% or less staff effort	Moderate assistance 50% staff effort	Maximum assistance 75% staff effort	Dependent 100% staff effort
Bed Mobility							
Rolling side to side							
Lying down to sitting							
Sitting to lying down							
Sit-to-stand transfer							
Stand-to-sit transfer							
Bed-to-chair transfer							
Sitting balance							
Standing balance							
Transfer to toilet							
Transfer to shower							
Walking							
Feeding							
Grooming							
Bathing							
Dressing upper body							
Dressing lower body							

**Care plan: Provide date of care plan and its duration**

**Aspects that could be addressed:**

1. URC met and determined the level of care to be at \_\_\_\_\_.
2. Describe need for daily JLCSN to manage/evaluate care of patient.
3. Describe need for daily skilled CS nursing.
4. Number of skilled CS nursing minutes required for care of patient.
5. Management of pain/discomfort.

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Medicare law requires Medicare Part A benefits be available to its enrollees for Religious Nonmedical Health Care Institutions (RNHCIs). This benefit applies to people with Part A who qualify for hospital or skilled nursing facility care, but medical care isn't in agreement with their religious beliefs. The RNHCI benefit, as a Part A benefit, must be made available to Medicare Advantage enrollees. This is made clear in statute, regulation, and the Medicare Managed Care Manual. Federal law, 42 U.S.C. § 1395w-22(a)(1); 42 C.F.R. § 422.101(a)

- 6. Mental state.
- 7. Family training.
- 8. Cleansing and dressing needs – frequency and time involved.
- 9. Communication.

Very important for the various activities outlined above to provide:

- 10. Short term goals
- 11. Long term goals
- 12. Discharge plans

**Consults:** All care provided by highly skilled Christian Science nurses and/or *Journal*-listed Christian Science nurses.

**Consent:** The patient signed a notarized Election Form for Medicare (see attached).

<b>Section E: Pre-Certification Criteria for Skilled Christian Science Nursing Facility Services</b>		
<b>Questions 1 to 5 must be YES and there must be at least 1 YES to Q6a to Q6e:</b>	<b>YES</b>	<b>NO</b>
1. The patient requires <b>inpatient</b> skilled Christian Science nursing services on a <b>daily</b> basis that must be performed by, or under the supervision of <i>Journal</i> -listed Christian Science nurse(s).		
2. The patient requires skilled Christian Science nursing services to <b>improve their condition</b> and/or <b>prevent deterioration</b> in the patient's illness or injury.		
3. The patient requires a <b>care plan</b> that will be developed, managed, monitored, and evaluated <b>daily</b> by a <i>Journal</i> -listed Christian Science nurse.		
4. The <b>care plan</b> includes goals and objectives for improvement, discharge plans and planned interventions.		
5. The patient has <b>health problems</b> requiring 35% or more <b>direct care</b> delivered by a skilled Christian Science nurse.		
6. For Skilled Christian Science nursing (at least 1 YES for Q6a to Q6e)		
a. The patient requires <b>observation, assessment and monitoring</b> .		
b. The patient and/or caregiver require <b>complex teaching services</b> .		
c. The patient requires <b>extensive care</b> due to an <b>obstructed airway</b> or is requiring acute care to <b>assure sufficient air intake</b> .		
d. The patient requires <b>cleansing and bandaging of wound(s)</b> several times daily.		
e. The patient has a <b>mental condition and/or behavior</b> that present a <b>risk of significant harm to self or others</b> .		
<b>Along with Criteria 1 to 6, the following Level of Care criteria must be met based on the applicable Revenue Code:</b>	<b>YES</b>	<b>NO</b>
<b>For Subacute Level IV (Revenue Code 0194) all answers must be YES to Q1 to Q2</b>		
1. The patient has <b>2 or more health problems</b> that will require a minimum of <b>720 minutes</b> of patient care within a 7 day period be delivered by <i>Journal</i> -listed Christian Science nurse(s).		

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Medicare law requires Medicare Part A benefits be available to its enrollees for Religious Nonmedical Health Care Institutions (RNHCIs). This benefit applies to people with Part A who qualify for hospital or skilled nursing facility care, but medical care isn't in agreement with their religious beliefs. The RNHCI benefit, as a Part A benefit, must be made available to Medicare Advantage enrollees. This is made clear in statute, regulation, and the Medicare Managed Care Manual. Federal law, 42 U.S.C. § 1395w-22(a)(1); 42 C.F.R. § 422.101(a)

2. The patient requires <i>Journal</i> -listed Christian Science nurse(s) to deliver care at least <b>5 days of care</b> for a health problem and at least <b>3 days of care</b> for a separate health problem.		
<b><i>For Subacute Level III (Revenue Code 0193) all answers must be YES to Q1 to Q2</i></b>		
1. The patient has <b>2 or more health problems</b> that will require a minimum of <b>500 minutes</b> of patient care <b>within a 7 day period</b> be delivered by <i>Journal</i> -listed Christian Science nurse(s).		
2. The patient requires <i>Journal</i> -listed Christian Science nurse(s) to deliver a minimum of <b>5 days of care</b> for <b>1 category of health problem</b> within any <b>7 day facility stay</b> .		
<b><i>For Subacute Level II (Revenue Code 0192) all answers must be YES to Q1 to Q2</i></b>		
1. The patient has <b>2 or more health problems</b> that will require a minimum of <b>325 minutes</b> of patient care <b>within a 7 day period</b> be delivered by <i>Journal</i> -listed Christian Science nurse(s).		
2. The patient requires <i>Journal</i> -listed Christian Science nurse(s) to deliver a minimum of 325 minutes of patient care <b>within 5 days of any 7 day period in the facility</b> .		
<b><i>For Subacute Level I (Revenue Code 0191) all answers must be YES to Q1 to Q3</i></b>		
1. The patient has <b>1 or more health problems</b> that require intermittent management by a <i>Journal</i> -listed Christian Science nurse.		
2. The patient requires <b>at least 150 minutes of patient care</b> by <i>Journal</i> -listed Christian Science(s), <b>within a 7 day period</b> .		
3. The patient requires <i>Journal</i> -listed Christian Science nurse(s) to deliver a minimum of 150 minutes of patient care <b>within 5 days of any 7 day period in the facility</b> .		

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date