

EXHIBIT A

PSYCHIATRIC UNIT CRITERIA WORK SHEET (CMS-437) CHANGE CROSSWALK

Note: For the purpose of this crosswalk, all Tag numbers have been removed from form CMS-437

REGULATIONS	CHANGES TO REGULATIONS/GUIDANCE	EXPLANATION
<p>§412.25 Excluded Hospital Units: Common Requirements</p> <p>(1) Be part of an institution that</p> <p style="padding-left: 20px;">(i) Has in effect an agreement to participate as a hospital;</p> <p style="padding-left: 20px;">(ii) Is not excluded in its entirety from the prospective payment systems; and</p> <p style="padding-left: 20px;">(iii) Has enough beds that are not excluded from the prospective payment systems to permit the provision of adequate cost information, as required by</p>	<p>§412.25 Excluded Hospital Units: Common Requirements</p> <p>(1) Be part of an institution that</p> <p style="padding-left: 20px;">(i) Has in effect an agreement to participate as a hospital;</p> <p style="padding-left: 20px;">(ii) Is not excluded in its entirety from the prospective payment systems; and</p> <p style="padding-left: 20px;">(iii) Has enough beds that are not excluded from the inpatient prospective payment systems to permit the provision of adequate cost information, as required by §413.24(c)</p>	<p>The word “inpatient” has been added to reflect the correct regulation language.</p>
<p>§412.27 Excluded Psychiatric Units: Additional Requirements:</p> <p>(a) Admit only patients whose admission to the unit is required for active treatment, of an intensity that can be provided appropriately on in an inpatient hospital setting, of a psychiatric principal diagnosis that is listed in the Third Edition of the American Psychiatric</p>	<p>§412.27 Excluded Psychiatric Units: Additional Requirements:</p> <p>(a) Admit only patients whose admission to the unit is required for active treatment, of an intensity that can be provided appropriately only in an inpatient hospital setting, of a psychiatric principal diagnosis that is listed in the Fourth Edition of the American Psychiatric Association’s Diagnostic and Statistical Manual or in Chapter Five (“Mental Disorders”) of the</p>	<p>Added “ly to the word on to make only, and changed the word “Third” to Fourth.</p>

Association’s Diagnostic and Statistical Manual or in Chapter Five (“Mental Disorders”) of the International Classification of Diseases, Ninth Revision, Clinical Modification.	International Classification of Diseases, Ninth Revision, Clinical Modification.	
(b) Furnish, through the use of qualified personnel, psychological services, social work, psychiatric nursing, occupational therapy , and recreational therapy.	(b) Furnish, through the use of qualified personnel, psychological services, social work, psychiatric nursing, and recreational therapy.	Removed “occupational therapy,”
(3) Treatment Plan. Each inpatient must have an additional comprehensive treatment plan that must be based on an inventory of the inpatient’s strengths and disabilities. The written plan must include a substantiated diagnosis; short-term and long-term goals; the specific treatment modalities utilized; the responsibilities of each member of the treatment team; and adequate documentation to justify the diagnosis and the treatment and rehabilitation activities carried out; and	(3) Treatment Plan. Each inpatient must have an individual comprehensive treatment plan that must be based on an inventory of the inpatient’s strengths and disabilities. The written plan must include a substantiated diagnosis; short-term and long-term goals; the specific treatment modalities utilized; the responsibilities of each member of the treatment team; and adequate documentation to justify the diagnosis and the treatment and rehabilitation activities carried out; and	Changed the word “additional” to the correct word “individual”.
Disclaimer Statement		
According to the Paperwork Reduction of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0938-0358. The time required to complete this information collection is estimated to average 15 minutes per response, including the time to review instructions, search		Updated disclaimer statement to include expiration date and current information for PRA Reports Clearance Officer.

<p>existing data resources, gather the data needed, and complete and review the information collection. If you have any comments concerning the accuracy of the time estimate(s) or suggestions for improving this form, please write to: CMS, Attn: PRA Reports Clearance Officer, 7500 Security Boulevard, Baltimore, Maryland 21244-1850.</p>		
--	--	--