



NYU Langone Health

Medicare Outpatient Observation Notice

Patient name:

Patient number:

You're a hospital outpatient receiving observation services. You are not an inpatient because:

- After observing you, your physician may find that you need more extensive services in the hospital and your status will change to "inpatient" or "admitted to the hospital". After observing you, your doctor may determine that you can go home and you will not be admitted to the hospital.
- The physician takes many things into account when determining your status. Some factors include:
 - How serious or dangerous your condition is
 - How much the treatment is helping you
 - What type of surgical procedures (operation) you may need
 - How long we think you will need to stay in the hospital

Being an outpatient may affect what you pay in a hospital:

- When you're a hospital outpatient, your observation stay is covered under Medicare Part B.
- For Part B services, you generally pay:
 - A copayment for each outpatient hospital service you get. Part B copayments may vary by type of service.
 - 20% of the Medicare-approved amount for most doctor services, after the Part B deductible.

Observation services may affect coverage and payment of your care after you leave the hospital:

- If you need skilled nursing facility (SNF) care after you leave the hospital, Medicare Part A will only cover SNF care if you've had a 3-day minimum, medically necessary, inpatient hospital stay for a related illness or injury. An inpatient hospital stay begins the day the hospital admits you as an inpatient based on a doctor's order and doesn't include the day you're discharged.
- If you have Medicaid, a Medicare Advantage plan or other health plan, Medicaid or the plan may have different rules for SNF coverage after you leave the hospital. Check with Medicaid or your plan.

NOTE: Medicare Part A generally doesn't cover outpatient hospital services, like an observation stay. However, Part A will generally cover medically necessary inpatient services if the hospital admits you as an inpatient based on a doctor's order. In most cases, you'll pay a one-time deductible for all of your inpatient hospital services for the first 60 days you're in a hospital.

If you have any questions about your observation services, ask the hospital staff member giving you this notice or the doctor providing your hospital care. You can also ask to speak with someone from the hospital's utilization or discharge planning department.

You can also call 1-800-MEDICARE (1-800-633-4227). TTY users should call 1-877-486-2048.

Your costs for medications:

Generally, prescription and over-the-counter drugs, including “self-administered drugs,” you get in a hospital outpatient setting (like an emergency department) aren’t covered by Part B. “Self-administered drugs” are drugs you’d normally take on your own. For safety reasons, many hospitals don’t allow you to take medications brought from home. If you have a Medicare prescription drug plan (Part D), your plan may help you pay for these drugs. You’ll likely need to pay out-of-pocket for these drugs and submit a claim to your drug plan for a refund. Contact your drug plan for more information.

If you’re enrolled in a Medicare Advantage plan (like an HMO or PPO) or other Medicare health plan (Part C), your costs and coverage may be different. Check with your plan to find out about coverage for outpatient observation services.

If you’re a Qualified Medicare Beneficiary through your state Medicaid program, you can’t be billed for Part A or Part B deductibles, coinsurance, and copayments.

Additional Information:

Information Required by the New York State Department of Health to be Given to Patients other than Medicare Beneficiaries within 24 Hours of Being Assigned to Observation Services

The information regarding Medicare does not apply to you.

This notice has been provided to inform you that you have been placed into Observation Services. You have not been admitted to the hospital.

Observation status may affect Medicaid and/or private insurance coverage for current hospital services, including medications and other supplies. It may also change how your insurance plan will pay if you are discharged to a skilled nursing facility, home care agency or other community based care.

Please contact your insurance plan to better understand what it means for you to being placed in observation services or status.

Please sign below to show you received and understand this notice.

Signature of Patient or Representative

Date / Time

Patient Name: _____

If patient unable to sign:

Name of Legal Representative: _____

Date / Time _____ / _____

Signature of Legal Representative: _____

Date / Time _____ / _____

Patient refused to sign:

Name of hospital representative: _____

Date / Time _____ / _____

Notice must be provided both orally and in writing within 24 hours of being assigned to Observation Services.

CMS does not discriminate in its programs and activities. To request this publication in alternative format, please call: 1-800-MEDICARE or email: AltFormatRequest@cms.hhs.gov.