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By Nina Youngstrom

Against the backdrop of hospital apprehension about Medicare Advantage (MA) plan follow through on the CMS rule requiring them to abide by traditional Medicare coverage criteria, UnitedHealthcare Medicare Advantage on Oct. 30 unveiled a policy stating that hospital admissions will be guided by the two-midnight rule, inpatient-only list and case-by-case exception. Presumably more MA plans will follow, but experts are watching to see what happens Jan. 1, when the policies are applied to patients and payments.

The 2024 final rule on MA policy and technical changes—which was published in the April 12 *Federal Register*—states that “MA organizations may not limit coverage through the adoption of policies and procedures—whether those policies and procedures are called utilization management and prior authorization or the standards and criteria that the MA organization uses to assess and evaluate medical necessity—when those policies and procedures result in denials of coverage or payment where the Traditional Medicare program would cover and pay for the item.”^[1] It takes effect Jan 1.

United’s new policy includes a section on inpatient hospital services. It explains that “physicians should use the expectation of the patient to require hospital care that spans at least two midnights as a benchmark, i.e., they should order admission for patients who are expected to require a hospital stay that crosses two midnights and the medical record supports that reasonable expectation.”^[2] It cites language from traditional Medicare’s two-midnight rule.

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