Patient name: Patient number: Hospital name: Hospital address:



Medicare Change of Status Notice

**Important!** You’re getting this notice because your hospital changed your status from “hospital inpatient” to “hospital outpatient receiving observation services.”

The box marked below shows what applies to you:



While you’re still in the hospital, your hospital stay will now be billed to Medicare Part B instead of Part A.

Your hospital bill may be lower or higher than the Part A inpatient deductible. Your hospital can give you more information about billing.

After you leave the hospital, Medicare will not pay if you go to a skilled nursing facility.

While you’re still in the hospital, the hospital may charge you the full cost of your outpatient hospital stay because you don’t have Medicare Part B.

After you leave the hospital, Medicare will not pay if you go to a skilled nursing facility.

**You Can Appeal**

* You can appeal your status change to a Quality Improvement Organization right away. Quality Improvement Organizations are independent of Medicare.



* If you decide to appeal, your Quality Improvement Organization will look at your records and give you its decision about 2 days after you ask for an appeal.
* Call your Quality Improvement Organization to appeal at:
* You should ask for an appeal as soon as possible and before you leave the hospital.
* After you leave the hospital, you still have appeal rights. Call your Quality Improvement Organization.

# What Happens After I Appeal?

Form CMS 10868 • Exp. 11/30/2027 • OMB approval 0938-1467

* You’ll get the appeal decision from the Quality Improvement Organization about 2 days after you appeal, even if you leave the hospital.
* If you decide to stay in the hospital beyond your planned discharge date you may be responsible for payment of services you get during the appeal process.
* If your appeal is favorable to you, Medicare may cover your skilled facility nursing stay after you leave the hospital.

# Questions?

* If you think you may want to appeal and want more information about the appeals process, call your Quality Improvement Organization at:
* For more information about your Medicare coverage, call 1-800-MEDICARE (1-800-633-4227). TTY users can call 1-877-486-2048.

# Additional Information (Optional):

Sign below to show you received and understood this notice.

Signature of patient or representative

Date



You have the right to get Medicare information in an accessible format, like large print, braille, or audio. You also have the right to file a complaint if you feel you’ve been discriminated against. Visit [Medicare.gov/about-us/accessibility-nondiscrimination-notice](https://www.Medicare.gov/about-us/accessibility-nondiscrimination-notice), or call 1-800-MEDICARE (1-800-633-4227) for more information. TTY users can call

1-877-486-2048.

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