

Psychiatric Hospital Crosswalk

Medicare Special Psychiatric Hospital Requirements to 2026 Joint Commission Hospital Standards & EPs

CFR Number §482.60	Medicare Requirements	Joint Commission Equivalent Number	Joint Commission Standards and Elements of Performance
§482.60	TAG: A-1600		
	§482.60 Special provisions applying to psychiatric hospitals.		
	Psychiatric hospital must—		
§482.60(a)	TAG: A-1601	NPG.12.03.01	For psychiatric hospitals that use Joint Commission accreditation for deemed status purposes: The psychiatric hospital develops and implements staffing plans according to law and regulation.
	§482.60(a) Be primarily engaged in providing, by or under the supervision of a doctor of medicine or osteopathy, psychiatric services for the diagnosis and treatment of mentally ill persons;	EP 1	For psychiatric hospitals that use Joint Commission accreditation for deemed status purposes: The psychiatric hospital does the following: <ul style="list-style-type: none"> Is primarily engaged in providing, by or under the supervision of a doctor of medicine or osteopathy, psychiatric services for the diagnosis and treatment of mentally ill persons. Meets the Medicare Conditions of Participation specified in 42 CFR 482.1 through 482.23, and 42 CFR 482.25 through 482.57. Meets the staffing requirements specified in 42 CFR 482.62.
§482.60(b)	TAG: A-1605	NPG.12.03.01	For psychiatric hospitals that use Joint Commission accreditation for deemed status purposes: The psychiatric hospital develops and implements staffing plans according to law and regulation.
	§482.60(b) Meet the conditions of participation specified in §§482.1 through 482.23 and §§482.25 through 482.57;	EP 1	For psychiatric hospitals that use Joint Commission accreditation for deemed status purposes: The psychiatric hospital does the following: <ul style="list-style-type: none"> Is primarily engaged in providing, by or under the supervision of a doctor of medicine or osteopathy, psychiatric services for the diagnosis and treatment of mentally ill persons. Meets the Medicare Conditions of Participation specified in 42 CFR 482.1 through 482.23, and 42 CFR 482.25 through 482.57. Meets the staffing requirements specified in 42 CFR 482.62.
§482.60(c)	TAG: A-1610	RC.11.01.01	The hospital maintains complete and accurate medical records for each individual patient.
	§482.60(c) Maintain clinical records on all patients, including records sufficient to permit CMS to determine the degree and intensity of treatment furnished to Medicare beneficiaries, as specified in §482.61; and	EP 5	For psychiatric hospitals that use Joint Commission accreditation for deemed status purposes: The psychiatric hospital maintains clinical records on all patients to determine the degree and intensity of treatments, as specified in 42 CFR 482.61.
§482.60(d)	TAG: A-1615	NPG.12.03.01	For psychiatric hospitals that use Joint Commission accreditation for deemed status purposes: The psychiatric hospital develops and implements staffing plans according to law and regulation.
	§482.60(d) Meet the staffing requirements specified in §482.62.	EP 1	For psychiatric hospitals that use Joint Commission accreditation for deemed status purposes: The psychiatric hospital does the following: <ul style="list-style-type: none"> Is primarily engaged in providing, by or under the supervision of a doctor of medicine or osteopathy, psychiatric services for the diagnosis and treatment of mentally ill persons. Meets the Medicare Conditions of Participation specified in 42 CFR 482.1 through 482.23, and 42 CFR 482.25 through 482.57. Meets the staffing requirements specified in 42 CFR 482.62.

CFR Number §482.61	Medicare Requirements	Joint Commission Equivalent Number	Joint Commission Standards and Elements of Performance
§482.61	TAG: A-1620	RC.11.01.01	The hospital maintains complete and accurate medical records for each individual patient.
<p>§482.61 Condition of Participation: Special medical record requirements for psychiatric hospitals.</p> <p>The medical records maintained by a psychiatric hospital must permit determination of the degree and intensity of the treatment provided to individuals who are furnished services in the institution.</p>		EP 5	For psychiatric hospitals that use Joint Commission accreditation for deemed status purposes: The psychiatric hospital maintains clinical records on all patients to determine the degree and intensity of treatments, as specified in 42 CFR 482.61.
§482.61(a)	TAG: A-1621	RC.11.01.01	The hospital maintains complete and accurate medical records for each individual patient.
<p>§482.61(a) Standard: Development of assessment/diagnostic data.</p> <p>Medical records must stress the psychiatric components of the record, including history of findings and treatment provided for the psychiatric condition for which the patient is hospitalized.</p>		EP 6	For psychiatric hospitals that use Joint Commission accreditation for deemed status purposes: The medical record contains the following information: <ul style="list-style-type: none"> • History of findings and treatment provided for the psychiatric condition for which the patient is hospitalized • Identification data, including the patient's legal status • Provisional or admitting diagnosis for the patient at the time of admission that includes the diagnoses of intercurrent diseases as well as the psychiatric diagnoses • Reasons for admission, as stated by the patient and/or others significantly involved • Social service records, including reports of interviews with patients, family members, and others; an assessment of home plans, family attitudes, and community resource contacts; and a social history • When indicated, record of a complete neurological examination, recorded at the time of the admission physical examination • Documentation of treatment received, including all active therapeutic efforts • Discharge summary of the patient's hospitalization that includes recommendations from appropriate services concerning follow-up or aftercare, as well as a brief summary of the patient's condition on discharge
§482.61(a)(1)	TAG: A-1622	RC.11.01.01	The hospital maintains complete and accurate medical records for each individual patient.
(1) The identification data must include the patient's legal status.		EP 6	For psychiatric hospitals that use Joint Commission accreditation for deemed status purposes: The medical record contains the following information: <ul style="list-style-type: none"> • History of findings and treatment provided for the psychiatric condition for which the patient is hospitalized • Identification data, including the patient's legal status • Provisional or admitting diagnosis for the patient at the time of admission that includes the diagnoses of intercurrent diseases as well as the psychiatric diagnoses • Reasons for admission, as stated by the patient and/or others significantly involved • Social service records, including reports of interviews with patients, family members, and others; an assessment of home plans, family attitudes, and community resource contacts; and a social history • When indicated, record of a complete neurological examination, recorded at the time of the admission physical examination • Documentation of treatment received, including all active therapeutic efforts • Discharge summary of the patient's hospitalization that includes recommendations from appropriate services concerning follow-up or aftercare, as well as a brief summary of the patient's condition on discharge

CFR Number §482.61(a)(2)	Medicare Requirements	Joint Commission Equivalent Number	Joint Commission Standards and Elements of Performance
§482.61(a)(2)	TAG: A-1623	RC.11.01.01	The hospital maintains complete and accurate medical records for each individual patient.
(2) A provisional or admitting diagnosis must be made on every patient at the time of admission, and must include the diagnoses of intercurrent diseases as well as the psychiatric diagnoses.		EP 6	For psychiatric hospitals that use Joint Commission accreditation for deemed status purposes: The medical record contains the following information: <ul style="list-style-type: none"> • History of findings and treatment provided for the psychiatric condition for which the patient is hospitalized • Identification data, including the patient's legal status • Provisional or admitting diagnosis for the patient at the time of admission that includes the diagnoses of intercurrent diseases as well as the psychiatric diagnoses • Reasons for admission, as stated by the patient and/or others significantly involved • Social service records, including reports of interviews with patients, family members, and others; an assessment of home plans, family attitudes, and community resource contacts; and a social history • When indicated, record of a complete neurological examination, recorded at the time of the admission physical examination • Documentation of treatment received, including all active therapeutic efforts • Discharge summary of the patient's hospitalization that includes recommendations from appropriate services concerning follow-up or aftercare, as well as a brief summary of the patient's condition on discharge
§482.61(a)(3)	TAG: A-1624	RC.11.01.01	The hospital maintains complete and accurate medical records for each individual patient.
(3) The reasons for admission must be clearly documented as stated by the patient and/or others significantly involved.		EP 6	For psychiatric hospitals that use Joint Commission accreditation for deemed status purposes: The medical record contains the following information: <ul style="list-style-type: none"> • History of findings and treatment provided for the psychiatric condition for which the patient is hospitalized • Identification data, including the patient's legal status • Provisional or admitting diagnosis for the patient at the time of admission that includes the diagnoses of intercurrent diseases as well as the psychiatric diagnoses • Reasons for admission, as stated by the patient and/or others significantly involved • Social service records, including reports of interviews with patients, family members, and others; an assessment of home plans, family attitudes, and community resource contacts; and a social history • When indicated, record of a complete neurological examination, recorded at the time of the admission physical examination • Documentation of treatment received, including all active therapeutic efforts • Discharge summary of the patient's hospitalization that includes recommendations from appropriate services concerning follow-up or aftercare, as well as a brief summary of the patient's condition on discharge
§482.61(a)(4)	TAG: A-1625	RC.11.01.01	The hospital maintains complete and accurate medical records for each individual patient.
(4) The social service records, including reports of interviews with patients, family members, and others, must provide an assessment of home plans and family attitudes, and community resource contacts as well as a social history.		EP 6	For psychiatric hospitals that use Joint Commission accreditation for deemed status purposes: The medical record contains the following information: <ul style="list-style-type: none"> • History of findings and treatment provided for the psychiatric condition for which the patient is hospitalized • Identification data, including the patient's legal status • Provisional or admitting diagnosis for the patient at the time of admission that includes the diagnoses of intercurrent diseases as well as the psychiatric diagnoses • Reasons for admission, as stated by the patient and/or others significantly involved • Social service records, including reports of interviews with patients, family members, and others; an assessment of home plans, family attitudes, and community resource contacts; and a social history • When indicated, record of a complete neurological examination, recorded at the time of the admission physical examination • Documentation of treatment received, including all active therapeutic efforts • Discharge summary of the patient's hospitalization that includes recommendations from appropriate services concerning follow-up or aftercare, as well as a brief summary of the patient's condition on discharge

CFR Number §482.61(a)(5)	Medicare Requirements	Joint Commission Equivalent Number	Joint Commission Standards and Elements of Performance
§482.61(a)(5) TAG: A-1626 (5) When indicated, a complete neurological examination must be recorded at the time of the admission physical examination.		PC.11.02.03	The hospital assesses the needs of patients who receive treatment for emotional and behavioral disorders.
		EP 1	The assessment for patients who receive treatment for emotional and behavioral disorders includes the following, based on their age and needs: <ul style="list-style-type: none"> • Psychiatric evaluation • Psychological assessments, including intellectual, projective, neuropsychological, and personality testing • For psychiatric hospitals that use Joint Commission accreditation for deemed status purposes: Complete neurological examination at the time of the admission physical examination, when indicated (For more information on physical examination, see PC.11.02.01, EP 2)
		RC.11.01.01	The hospital maintains complete and accurate medical records for each individual patient.
		EP 6	For psychiatric hospitals that use Joint Commission accreditation for deemed status purposes: The medical record contains the following information: <ul style="list-style-type: none"> • History of findings and treatment provided for the psychiatric condition for which the patient is hospitalized • Identification data, including the patient's legal status • Provisional or admitting diagnosis for the patient at the time of admission that includes the diagnoses of intercurrent diseases as well as the psychiatric diagnoses • Reasons for admission, as stated by the patient and/or others significantly involved • Social service records, including reports of interviews with patients, family members, and others; an assessment of home plans, family attitudes, and community resource contacts; and a social history • When indicated, record of a complete neurological examination, recorded at the time of the admission physical examination • Documentation of treatment received, including all active therapeutic efforts • Discharge summary of the patient's hospitalization that includes recommendations from appropriate services concerning follow-up or aftercare, as well as a brief summary of the patient's condition on discharge
§482.61(b) TAG: A-1630 §482.61(b) Standard: Psychiatric evaluation. Each patient must receive a psychiatric evaluation that must—		PC.11.02.03	The hospital assesses the needs of patients who receive treatment for emotional and behavioral disorders.
		EP 2	For psychiatric hospitals that use Joint Commission accreditation for deemed status purposes: Each patient receives a psychiatric evaluation completed within 60 hours of admission. The psychiatric evaluation includes the following: <ul style="list-style-type: none"> • Medical history • Record of mental status • Description of the onset of illness and the circumstances leading to admission • Description of attitudes and behavior • Estimation of intellectual functioning, memory functioning, and orientation • Inventory of the patient's assets in descriptive, not interpretative, fashion
§482.61(b)(1) TAG: A-1631 (1) Be completed within 60 hours of admission;		PC.11.02.03	The hospital assesses the needs of patients who receive treatment for emotional and behavioral disorders.
		EP 2	For psychiatric hospitals that use Joint Commission accreditation for deemed status purposes: Each patient receives a psychiatric evaluation completed within 60 hours of admission. The psychiatric evaluation includes the following: <ul style="list-style-type: none"> • Medical history • Record of mental status • Description of the onset of illness and the circumstances leading to admission • Description of attitudes and behavior • Estimation of intellectual functioning, memory functioning, and orientation • Inventory of the patient's assets in descriptive, not interpretative, fashion

CFR Number §482.61(b)(2)	Medicare Requirements	Joint Commission Equivalent Number	Joint Commission Standards and Elements of Performance
§482.61(b)(2)	TAG: A-1632	PC.11.02.03	The hospital assesses the needs of patients who receive treatment for emotional and behavioral disorders.
(2) Include a medical history;		EP 2	For psychiatric hospitals that use Joint Commission accreditation for deemed status purposes: Each patient receives a psychiatric evaluation completed within 60 hours of admission. The psychiatric evaluation includes the following: <ul style="list-style-type: none"> • Medical history • Record of mental status • Description of the onset of illness and the circumstances leading to admission • Description of attitudes and behavior • Estimation of intellectual functioning, memory functioning, and orientation • Inventory of the patient's assets in descriptive, not interpretative, fashion
§482.61(b)(3)	TAG: A-1633	PC.11.02.03	The hospital assesses the needs of patients who receive treatment for emotional and behavioral disorders.
(3) Contain a record of mental status;		EP 2	For psychiatric hospitals that use Joint Commission accreditation for deemed status purposes: Each patient receives a psychiatric evaluation completed within 60 hours of admission. The psychiatric evaluation includes the following: <ul style="list-style-type: none"> • Medical history • Record of mental status • Description of the onset of illness and the circumstances leading to admission • Description of attitudes and behavior • Estimation of intellectual functioning, memory functioning, and orientation • Inventory of the patient's assets in descriptive, not interpretative, fashion
§482.61(b)(4)	TAG: A-1634	PC.11.02.03	The hospital assesses the needs of patients who receive treatment for emotional and behavioral disorders.
(4) Note the onset of illness and the circumstances leading to admission;		EP 2	For psychiatric hospitals that use Joint Commission accreditation for deemed status purposes: Each patient receives a psychiatric evaluation completed within 60 hours of admission. The psychiatric evaluation includes the following: <ul style="list-style-type: none"> • Medical history • Record of mental status • Description of the onset of illness and the circumstances leading to admission • Description of attitudes and behavior • Estimation of intellectual functioning, memory functioning, and orientation • Inventory of the patient's assets in descriptive, not interpretative, fashion
§482.61(b)(5)	TAG: A-1635	PC.11.02.03	The hospital assesses the needs of patients who receive treatment for emotional and behavioral disorders.
(5) Describe attitudes and behavior;		EP 2	For psychiatric hospitals that use Joint Commission accreditation for deemed status purposes: Each patient receives a psychiatric evaluation completed within 60 hours of admission. The psychiatric evaluation includes the following: <ul style="list-style-type: none"> • Medical history • Record of mental status • Description of the onset of illness and the circumstances leading to admission • Description of attitudes and behavior • Estimation of intellectual functioning, memory functioning, and orientation • Inventory of the patient's assets in descriptive, not interpretative, fashion

CFR Number §482.61(b)(6)	Medicare Requirements	Joint Commission Equivalent Number	Joint Commission Standards and Elements of Performance
§482.61(b)(6) TAG: A-1636	(6) Estimate intellectual functioning, memory functioning, and orientation; and	PC.11.02.03	The hospital assesses the needs of patients who receive treatment for emotional and behavioral disorders.
		EP 2	For psychiatric hospitals that use Joint Commission accreditation for deemed status purposes: Each patient receives a psychiatric evaluation completed within 60 hours of admission. The psychiatric evaluation includes the following: <ul style="list-style-type: none"> • Medical history • Record of mental status • Description of the onset of illness and the circumstances leading to admission • Description of attitudes and behavior • Estimation of intellectual functioning, memory functioning, and orientation • Inventory of the patient's assets in descriptive, not interpretative, fashion
§482.61(b)(7) TAG: A-1637	(7) Include an inventory of the patient's assets in descriptive, not interpretative, fashion.	PC.11.02.03	The hospital assesses the needs of patients who receive treatment for emotional and behavioral disorders.
		EP 2	For psychiatric hospitals that use Joint Commission accreditation for deemed status purposes: Each patient receives a psychiatric evaluation completed within 60 hours of admission. The psychiatric evaluation includes the following: <ul style="list-style-type: none"> • Medical history • Record of mental status • Description of the onset of illness and the circumstances leading to admission • Description of attitudes and behavior • Estimation of intellectual functioning, memory functioning, and orientation • Inventory of the patient's assets in descriptive, not interpretative, fashion
§482.61(c) TAG: A-1640	§482.61(c) Standard: Treatment plan.		
§482.61(c)(1) TAG: A-1640	(1) Each patient must have an individual comprehensive treatment plan that must be based on an inventory of the patient's strengths and disabilities. The written plan must include—	PC.11.03.01	The hospital plans the patient's care.
		EP 3	For psychiatric hospitals that use Joint Commission accreditation for deemed status purposes: Each patient has an individual comprehensive treatment plan that is based on an inventory of the patient's strengths and disabilities. The written plan includes the following: <ul style="list-style-type: none"> • Substantiated diagnosis • Short-term and long-term goals • Specific treatment modalities utilized • Responsibilities of each member of the treatment team • Adequate documentation to justify the diagnosis and the treatment and rehabilitation activities carried out
§482.61(c)(1)(i) TAG: A-1641	(i) A substantiated diagnosis;	PC.11.03.01	The hospital plans the patient's care.
		EP 3	For psychiatric hospitals that use Joint Commission accreditation for deemed status purposes: Each patient has an individual comprehensive treatment plan that is based on an inventory of the patient's strengths and disabilities. The written plan includes the following: <ul style="list-style-type: none"> • Substantiated diagnosis • Short-term and long-term goals • Specific treatment modalities utilized • Responsibilities of each member of the treatment team • Adequate documentation to justify the diagnosis and the treatment and rehabilitation activities carried out

CFR Number §482.61(c)(1)(ii)	Medicare Requirements	Joint Commission Equivalent Number	Joint Commission Standards and Elements of Performance
§482.61(c)(1)(ii) TAG: A-1642		PC.11.03.01	The hospital plans the patient's care.
(ii) Short-term and long-range goals;		EP 3	For psychiatric hospitals that use Joint Commission accreditation for deemed status purposes: Each patient has an individual comprehensive treatment plan that is based on an inventory of the patient's strengths and disabilities. The written plan includes the following: <ul style="list-style-type: none"> • Substantiated diagnosis • Short-term and long-term goals • Specific treatment modalities utilized • Responsibilities of each member of the treatment team • Adequate documentation to justify the diagnosis and the treatment and rehabilitation activities carried out
§482.61(c)(1)(iii) TAG: A-1643		PC.11.03.01	The hospital plans the patient's care.
(iii) The specific treatment modalities utilized;		EP 3	For psychiatric hospitals that use Joint Commission accreditation for deemed status purposes: Each patient has an individual comprehensive treatment plan that is based on an inventory of the patient's strengths and disabilities. The written plan includes the following: <ul style="list-style-type: none"> • Substantiated diagnosis • Short-term and long-term goals • Specific treatment modalities utilized • Responsibilities of each member of the treatment team • Adequate documentation to justify the diagnosis and the treatment and rehabilitation activities carried out
§482.61(c)(1)(iv) TAG: A-1644		PC.11.03.01	The hospital plans the patient's care.
(iv) The responsibilities of each member of the treatment team; and		EP 3	For psychiatric hospitals that use Joint Commission accreditation for deemed status purposes: Each patient has an individual comprehensive treatment plan that is based on an inventory of the patient's strengths and disabilities. The written plan includes the following: <ul style="list-style-type: none"> • Substantiated diagnosis • Short-term and long-term goals • Specific treatment modalities utilized • Responsibilities of each member of the treatment team • Adequate documentation to justify the diagnosis and the treatment and rehabilitation activities carried out
§482.61(c)(1)(v) TAG: A-1645		PC.11.03.01	The hospital plans the patient's care.
(v) Adequate documentation to justify the diagnosis and the treatment and rehabilitation activities carried out.		EP 3	For psychiatric hospitals that use Joint Commission accreditation for deemed status purposes: Each patient has an individual comprehensive treatment plan that is based on an inventory of the patient's strengths and disabilities. The written plan includes the following: <ul style="list-style-type: none"> • Substantiated diagnosis • Short-term and long-term goals • Specific treatment modalities utilized • Responsibilities of each member of the treatment team • Adequate documentation to justify the diagnosis and the treatment and rehabilitation activities carried out

CFR Number §482.61(c)(2)	Medicare Requirements	Joint Commission Equivalent Number	Joint Commission Standards and Elements of Performance
§482.61(c)(2) TAG: A-1650	(2) The treatment received by the patient must be documented in such a way to assure that all active therapeutic efforts are included.	RC.11.01.01	The hospital maintains complete and accurate medical records for each individual patient.
		EP 6	For psychiatric hospitals that use Joint Commission accreditation for deemed status purposes: The medical record contains the following information: <ul style="list-style-type: none"> • History of findings and treatment provided for the psychiatric condition for which the patient is hospitalized • Identification data, including the patient's legal status • Provisional or admitting diagnosis for the patient at the time of admission that includes the diagnoses of intercurrent diseases as well as the psychiatric diagnoses • Reasons for admission, as stated by the patient and/or others significantly involved • Social service records, including reports of interviews with patients, family members, and others; an assessment of home plans, family attitudes, and community resource contacts; and a social history • When indicated, record of a complete neurological examination, recorded at the time of the admission physical examination • Documentation of treatment received, including all active therapeutic efforts • Discharge summary of the patient's hospitalization that includes recommendations from appropriate services concerning follow-up or aftercare, as well as a brief summary of the patient's condition on discharge
§482.61(d) TAG: A-1655, A-1660, A-1661, A-1662	§482.61(d) Standard: Recording progress.	RC.12.01.01	The medical record contains information that reflects the patient's care, treatment, and services.
	Progress notes for the patient must be documented, in accordance with applicable State scope-of-practice laws and hospital policies, by the following qualified practitioners: Doctor(s) of medicine or osteopathy, or other licensed practitioner(s), who is responsible for the care of the patient; nurse(s) and social worker(s) (or social service staff) involved in the care of the patient; and, when appropriate, others significantly involved in the patient's active treatment modalities. The frequency of progress notes is determined by the condition of the patient but must be recorded at least weekly for the first 2 months and at least once a month thereafter, and must contain recommendations for revisions in the treatment plan as indicated as well as a precise assessment of the patient's progress in accordance with the original or revised treatment plan.	EP 4	For psychiatric hospitals that use Joint Commission accreditation for deemed status purposes: Progress notes are documented in accordance with applicable state scope-of-practice laws and hospital policies by the following qualified practitioners: <ul style="list-style-type: none"> • Doctor(s) of medicine or osteopathy or other licensed practitioner(s) who is responsible for the care of the patient • Nurse(s) • Social worker(s) or social service staff involved in the care of the patient • When appropriate, others significantly involved in the patient's active treatment modalities The patient's condition determines the frequency of progress notes, but they must be recorded at least weekly for the first 2 months and at least once a month thereafter. The progress notes must contain recommendations for revisions in the treatment plan as indicated, as well as a precise assessment of the patient's progress in accordance with the original or revised treatment plan.
§482.61(e) TAG: A-1670, A-1671, A-1672	§482.61(e) Standard: Discharge planning and discharge summary.	RC.11.01.01	The hospital maintains complete and accurate medical records for each individual patient.
	The record of each patient who has been discharged must have a discharge summary that includes a recapitulation of the patient's hospitalization and recommendations from appropriate services concerning follow-up or aftercare as well as a brief summary of the patient's condition on discharge.	EP 6	For psychiatric hospitals that use Joint Commission accreditation for deemed status purposes: The medical record contains the following information: <ul style="list-style-type: none"> • History of findings and treatment provided for the psychiatric condition for which the patient is hospitalized • Identification data, including the patient's legal status • Provisional or admitting diagnosis for the patient at the time of admission that includes the diagnoses of intercurrent diseases as well as the psychiatric diagnoses • Reasons for admission, as stated by the patient and/or others significantly involved • Social service records, including reports of interviews with patients, family members, and others; an assessment of home plans, family attitudes, and community resource contacts; and a social history • When indicated, record of a complete neurological examination, recorded at the time of the admission physical examination • Documentation of treatment received, including all active therapeutic efforts • Discharge summary of the patient's hospitalization that includes recommendations from appropriate services concerning follow-up or aftercare, as well as a brief summary of the patient's condition on discharge

CFR Number §482.61(f)	Medicare Requirements	Joint Commission Equivalent Number	Joint Commission Standards and Elements of Performance
§482.61(f) TAG: A-1673	§482.61(f) Standard: Electronic notifications. If the hospital utilizes an electronic medical records system or other electronic administrative system, which is conformant with the content exchange standard at 45 CFR 170.205(d)(2), then the hospital must demonstrate that—		
§482.61(f)(1) TAG: A-1673	(1) The system's notification capacity is fully operational and the hospital uses it in accordance with all State and Federal statutes and regulations applicable to the hospital's exchange of patient health information.	IM.13.01.05	For hospitals that use Joint Commission accreditation for deemed status purposes: The hospital meets requirements for the electronic exchange of patient health information. Note: This standard only applies to hospitals that utilize an electronic health records system or other electronic administrative system that conforms with the content exchange standard at 45 CFR 170.205(d)(2).
		EP 1	For hospitals that use Joint Commission accreditation for deemed status purposes: The hospital demonstrates that its electronic health records system's (or other electronic administrative system's) notification capacity is fully operational and is used in accordance with applicable state and federal laws and regulations for the exchange of patient health information.
§482.61(f)(2) TAG: A-1673	(2) The system sends notifications that must include at least patient name, treating practitioner name, and sending institution name.	IM.13.01.05	For hospitals that use Joint Commission accreditation for deemed status purposes: The hospital meets requirements for the electronic exchange of patient health information. Note: This standard only applies to hospitals that utilize an electronic health records system or other electronic administrative system that conforms with the content exchange standard at 45 CFR 170.205(d)(2).
		EP 2	For hospitals that use Joint Commission accreditation for deemed status purposes: The hospital demonstrates that its electronic health records system (or other electronic administrative system) sends notifications that include, at a minimum, the patient's name, treating licensed practitioner's name, and sending institution's name.
§482.61(f)(3) TAG: A-1673	(3) To the extent permissible under applicable federal and state law and regulations, and not inconsistent with the patient's expressed privacy preferences, the system sends notifications directly, or through an intermediary that facilitates exchange of health information, at the time of:	IM.13.01.05	For hospitals that use Joint Commission accreditation for deemed status purposes: The hospital meets requirements for the electronic exchange of patient health information. Note: This standard only applies to hospitals that utilize an electronic health records system or other electronic administrative system that conforms with the content exchange standard at 45 CFR 170.205(d)(2).
		EP 3	For hospitals that use Joint Commission accreditation for deemed status purposes: In accordance with the patient's expressed privacy preferences and applicable laws and regulations, the hospital's electronic health records system (or other electronic administrative system) sends notifications directly, or through an intermediary that facilitates exchange of health information, at the following times, when applicable: <ul style="list-style-type: none"> • The patient's emergency department registration • The patient's inpatient admission
§482.61(f)(3)(i) TAG: A-1673	(i) The patient's registration in the hospital's emergency department (if applicable).	IM.13.01.05	For hospitals that use Joint Commission accreditation for deemed status purposes: The hospital meets requirements for the electronic exchange of patient health information. Note: This standard only applies to hospitals that utilize an electronic health records system or other electronic administrative system that conforms with the content exchange standard at 45 CFR 170.205(d)(2).
		EP 3	For hospitals that use Joint Commission accreditation for deemed status purposes: In accordance with the patient's expressed privacy preferences and applicable laws and regulations, the hospital's electronic health records system (or other electronic administrative system) sends notifications directly, or through an intermediary that facilitates exchange of health information, at the following times, when applicable: <ul style="list-style-type: none"> • The patient's emergency department registration • The patient's inpatient admission

CFR Number §482.61(f)(3)(ii)	Medicare Requirements	Joint Commission Equivalent Number	Joint Commission Standards and Elements of Performance
§482.61(f)(3)(ii) (ii) The patient's admission to the hospital's inpatient services (if applicable).	TAG: A-1673	IM.13.01.05	For hospitals that use Joint Commission accreditation for deemed status purposes: The hospital meets requirements for the electronic exchange of patient health information. Note: This standard only applies to hospitals that utilize an electronic health records system or other electronic administrative system that conforms with the content exchange standard at 45 CFR 170.205(d)(2).
		EP 3	For hospitals that use Joint Commission accreditation for deemed status purposes: In accordance with the patient's expressed privacy preferences and applicable laws and regulations, the hospital's electronic health records system (or other electronic administrative system) sends notifications directly, or through an intermediary that facilitates exchange of health information, at the following times, when applicable: <ul style="list-style-type: none"> • The patient's emergency department registration • The patient's inpatient admission
§482.61(f)(4) (4) To the extent permissible under applicable federal and state law and regulations, and not inconsistent with the patient's expressed privacy preferences, the system sends notifications directly, or through an intermediary that facilitates exchange of health information, either immediately prior to, or at the time of:	TAG: A-1673	IM.13.01.05	For hospitals that use Joint Commission accreditation for deemed status purposes: The hospital meets requirements for the electronic exchange of patient health information. Note: This standard only applies to hospitals that utilize an electronic health records system or other electronic administrative system that conforms with the content exchange standard at 45 CFR 170.205(d)(2).
		EP 4	For hospitals that use Joint Commission accreditation for deemed status purposes: In accordance with the patient's expressed privacy preferences and applicable laws and regulations, the hospital's electronic health records system (or other electronic administrative system) sends notifications directly, or through an intermediary that facilitates exchange of health information, either immediately prior to or at the time of the patient's discharge or transfer from the hospital's emergency department or inpatient services.
§482.61(f)(4)(i) (i) The patient's discharge or transfer from the hospital's emergency department (if applicable).	TAG: A-1673	IM.13.01.05	For hospitals that use Joint Commission accreditation for deemed status purposes: The hospital meets requirements for the electronic exchange of patient health information. Note: This standard only applies to hospitals that utilize an electronic health records system or other electronic administrative system that conforms with the content exchange standard at 45 CFR 170.205(d)(2).
		EP 4	For hospitals that use Joint Commission accreditation for deemed status purposes: In accordance with the patient's expressed privacy preferences and applicable laws and regulations, the hospital's electronic health records system (or other electronic administrative system) sends notifications directly, or through an intermediary that facilitates exchange of health information, either immediately prior to or at the time of the patient's discharge or transfer from the hospital's emergency department or inpatient services.
§482.61(f)(4)(ii) (ii) The patient's discharge or transfer from the hospital's inpatient services (if applicable).	TAG: A-1673	IM.13.01.05	For hospitals that use Joint Commission accreditation for deemed status purposes: The hospital meets requirements for the electronic exchange of patient health information. Note: This standard only applies to hospitals that utilize an electronic health records system or other electronic administrative system that conforms with the content exchange standard at 45 CFR 170.205(d)(2).
		EP 4	For hospitals that use Joint Commission accreditation for deemed status purposes: In accordance with the patient's expressed privacy preferences and applicable laws and regulations, the hospital's electronic health records system (or other electronic administrative system) sends notifications directly, or through an intermediary that facilitates exchange of health information, either immediately prior to or at the time of the patient's discharge or transfer from the hospital's emergency department or inpatient services.

CFR Number §482.61(f)(5)	Medicare Requirements	Joint Commission Equivalent Number	Joint Commission Standards and Elements of Performance
§482.61(f)(5)	TAG: A-1674	IM.13.01.05	For hospitals that use Joint Commission accreditation for deemed status purposes: The hospital meets requirements for the electronic exchange of patient health information. Note: This standard only applies to hospitals that utilize an electronic health records system or other electronic administrative system that conforms with the content exchange standard at 45 CFR 170.205(d)(2).
(5) The hospital has made a reasonable effort to ensure that the system sends the notifications to all applicable post-acute care services providers and suppliers, as well as to any of the following practitioners and entities, which need to receive notification of the patient's status for treatment, care coordination, or quality improvement purposes:		EP 5	For hospitals that use Joint Commission accreditation for deemed status purposes: The hospital makes a reasonable effort to confirm that its electronic health records system (or other electronic administrative system) sends the notifications to all applicable post-acute care service providers and suppliers, as well as any of the following who need to receive notification of the patient's status for treatment, care coordination, or quality improvement purposes: <ul style="list-style-type: none"> • Patient's established primary care licensed practitioner • Patient's established primary care practice group or entity • Other licensed practitioners, or other practice groups or entities, identified by the patient as primarily responsible for the patient's care Note: The term "reasonable effort" means that the hospital has a process to send patient event notifications while working within the constraints of its technology infrastructure. There may be instances in which the hospital (or its intermediary) cannot identify an applicable recipient for a patient event notification despite establishing processes for identifying recipients. In addition, some recipients may not be able to receive patient event notifications in a manner consistent with the hospital system's capabilities.
§482.61(f)(5)(i)	TAG: A-1674	IM.13.01.05	For hospitals that use Joint Commission accreditation for deemed status purposes: The hospital meets requirements for the electronic exchange of patient health information. Note: This standard only applies to hospitals that utilize an electronic health records system or other electronic administrative system that conforms with the content exchange standard at 45 CFR 170.205(d)(2).
(i) The patient's established primary care practitioner;		EP 5	For hospitals that use Joint Commission accreditation for deemed status purposes: The hospital makes a reasonable effort to confirm that its electronic health records system (or other electronic administrative system) sends the notifications to all applicable post-acute care service providers and suppliers, as well as any of the following who need to receive notification of the patient's status for treatment, care coordination, or quality improvement purposes: <ul style="list-style-type: none"> • Patient's established primary care licensed practitioner • Patient's established primary care practice group or entity • Other licensed practitioners, or other practice groups or entities, identified by the patient as primarily responsible for the patient's care Note: The term "reasonable effort" means that the hospital has a process to send patient event notifications while working within the constraints of its technology infrastructure. There may be instances in which the hospital (or its intermediary) cannot identify an applicable recipient for a patient event notification despite establishing processes for identifying recipients. In addition, some recipients may not be able to receive patient event notifications in a manner consistent with the hospital system's capabilities.

CFR Number §482.61(f)(5)(ii)	Medicare Requirements	Joint Commission Equivalent Number	Joint Commission Standards and Elements of Performance
§482.61(f)(5)(ii)	TAG: A-1674	IM.13.01.05	For hospitals that use Joint Commission accreditation for deemed status purposes: The hospital meets requirements for the electronic exchange of patient health information. Note: This standard only applies to hospitals that utilize an electronic health records system or other electronic administrative system that conforms with the content exchange standard at 45 CFR 170.205(d)(2).
(ii) The patient's established primary care practice group or entity; or		EP 5	For hospitals that use Joint Commission accreditation for deemed status purposes: The hospital makes a reasonable effort to confirm that its electronic health records system (or other electronic administrative system) sends the notifications to all applicable post-acute care service providers and suppliers, as well as any of the following who need to receive notification of the patient's status for treatment, care coordination, or quality improvement purposes: <ul style="list-style-type: none"> • Patient's established primary care licensed practitioner • Patient's established primary care practice group or entity • Other licensed practitioners, or other practice groups or entities, identified by the patient as primarily responsible for the patient's care Note: The term "reasonable effort" means that the hospital has a process to send patient event notifications while working within the constraints of its technology infrastructure. There may be instances in which the hospital (or its intermediary) cannot identify an applicable recipient for a patient event notification despite establishing processes for identifying recipients. In addition, some recipients may not be able to receive patient event notifications in a manner consistent with the hospital system's capabilities.
§482.61(f)(5)(iii)	TAG: A-1674	IM.13.01.05	For hospitals that use Joint Commission accreditation for deemed status purposes: The hospital meets requirements for the electronic exchange of patient health information. Note: This standard only applies to hospitals that utilize an electronic health records system or other electronic administrative system that conforms with the content exchange standard at 45 CFR 170.205(d)(2).
(iii) Other practitioner, or other practice group or entity, identified by the patient as the practitioner, or practice group or entity, primarily responsible for his or her care.		EP 5	For hospitals that use Joint Commission accreditation for deemed status purposes: The hospital makes a reasonable effort to confirm that its electronic health records system (or other electronic administrative system) sends the notifications to all applicable post-acute care service providers and suppliers, as well as any of the following who need to receive notification of the patient's status for treatment, care coordination, or quality improvement purposes: <ul style="list-style-type: none"> • Patient's established primary care licensed practitioner • Patient's established primary care practice group or entity • Other licensed practitioners, or other practice groups or entities, identified by the patient as primarily responsible for the patient's care Note: The term "reasonable effort" means that the hospital has a process to send patient event notifications while working within the constraints of its technology infrastructure. There may be instances in which the hospital (or its intermediary) cannot identify an applicable recipient for a patient event notification despite establishing processes for identifying recipients. In addition, some recipients may not be able to receive patient event notifications in a manner consistent with the hospital system's capabilities.

CFR Number §482.62	Medicare Requirements	Joint Commission Equivalent Number	Joint Commission Standards and Elements of Performance
§482.62	TAG: A-1680	NPG.12.03.01	For psychiatric hospitals that use Joint Commission accreditation for deemed status purposes: The psychiatric hospital develops and implements staffing plans according to law and regulation.
§482.62 Condition of Participation: Special staff requirements for psychiatric hospitals.			
The hospital must have adequate numbers of qualified professional and supportive staff to evaluate patients, formulate written, individualized comprehensive treatment plans, provide active treatment measures, and engage in discharge planning.		EP 4	For psychiatric hospitals that use Joint Commission accreditation for deemed status purposes: There is an adequate number of qualified professional, technical, and consultative staff (including but not limited to doctors of medicine and/or osteopathy, registered nurses, licensed practical nurses, and mental health workers) to do the following: <ul style="list-style-type: none"> • Evaluate patients • Formulate written individualized, comprehensive treatment plans • Provide active treatment measures • Engage in discharge planning • Provide the nursing care necessary under each patient's active treatment program • Maintain progress notes on each patient • Provide essential psychiatric services
§482.62(a)	TAG: A-1685		
§482.62(a) Standard: Personnel.			
The hospital must employ or undertake to provide adequate numbers of qualified professional, technical, and consultative personnel to:			
§482.62(a)(1)	TAG: A-1685	NPG.12.03.01	For psychiatric hospitals that use Joint Commission accreditation for deemed status purposes: The psychiatric hospital develops and implements staffing plans according to law and regulation.
(1) Evaluate patients;			
		EP 4	For psychiatric hospitals that use Joint Commission accreditation for deemed status purposes: There is an adequate number of qualified professional, technical, and consultative staff (including but not limited to doctors of medicine and/or osteopathy, registered nurses, licensed practical nurses, and mental health workers) to do the following: <ul style="list-style-type: none"> • Evaluate patients • Formulate written individualized, comprehensive treatment plans • Provide active treatment measures • Engage in discharge planning • Provide the nursing care necessary under each patient's active treatment program • Maintain progress notes on each patient • Provide essential psychiatric services
§482.62(a)(2)	TAG: A-1686	NPG.12.03.01	For psychiatric hospitals that use Joint Commission accreditation for deemed status purposes: The psychiatric hospital develops and implements staffing plans according to law and regulation.
(2) Formulate written individualized, comprehensive treatment plans;			
		EP 4	For psychiatric hospitals that use Joint Commission accreditation for deemed status purposes: There is an adequate number of qualified professional, technical, and consultative staff (including but not limited to doctors of medicine and/or osteopathy, registered nurses, licensed practical nurses, and mental health workers) to do the following: <ul style="list-style-type: none"> • Evaluate patients • Formulate written individualized, comprehensive treatment plans • Provide active treatment measures • Engage in discharge planning • Provide the nursing care necessary under each patient's active treatment program • Maintain progress notes on each patient • Provide essential psychiatric services

CFR Number §482.62(a)(3)	Medicare Requirements	Joint Commission Equivalent Number	Joint Commission Standards and Elements of Performance
§482.62(a)(3) TAG: A-1687	(3) Provide active treatment measures; and	NPG.12.03.01	For psychiatric hospitals that use Joint Commission accreditation for deemed status purposes: The psychiatric hospital develops and implements staffing plans according to law and regulation.
		EP 4	For psychiatric hospitals that use Joint Commission accreditation for deemed status purposes: There is an adequate number of qualified professional, technical, and consultative staff (including but not limited to doctors of medicine and/or osteopathy, registered nurses, licensed practical nurses, and mental health workers) to do the following: <ul style="list-style-type: none"> • Evaluate patients • Formulate written individualized, comprehensive treatment plans • Provide active treatment measures • Engage in discharge planning • Provide the nursing care necessary under each patient's active treatment program • Maintain progress notes on each patient • Provide essential psychiatric services
§482.62(a)(4) TAG: A-1688	(4) Engage in discharge planning.	NPG.12.03.01	For psychiatric hospitals that use Joint Commission accreditation for deemed status purposes: The psychiatric hospital develops and implements staffing plans according to law and regulation.
		EP 4	For psychiatric hospitals that use Joint Commission accreditation for deemed status purposes: There is an adequate number of qualified professional, technical, and consultative staff (including but not limited to doctors of medicine and/or osteopathy, registered nurses, licensed practical nurses, and mental health workers) to do the following: <ul style="list-style-type: none"> • Evaluate patients • Formulate written individualized, comprehensive treatment plans • Provide active treatment measures • Engage in discharge planning • Provide the nursing care necessary under each patient's active treatment program • Maintain progress notes on each patient • Provide essential psychiatric services
§482.62(b) TAG: A-1690, A-1691	§482.62(b) Standard: Director of inpatient psychiatric services; medical staff.	MS.17.01.03	The hospital collects information regarding each physician's or other licensed practitioner's current license status, training, experience, competence, and ability to perform the requested privilege.
Inpatient psychiatric services must be under the supervision of a clinical director, service chief, or equivalent who is qualified to provide the leadership required for an intensive treatment program. The number and qualifications of doctors of medicine and osteopathy must be adequate to provide essential psychiatric services.		EP 6	For psychiatric hospitals that use Joint Commission accreditation for deemed status purposes: Inpatient psychiatric services are under the direction and supervision of a clinical director, service chief, or equivalent who is qualified to provide the leadership required for an intensive treatment program and who meets the training and experience requirements for examination by the American Board of Psychiatry and Neurology or the American Osteopathic Board of Neurology and Psychiatry. The number and qualifications of doctors of medicine and osteopathy are adequate to provide essential psychiatric services.
§482.62(b)(1) TAG: A-1692	(1) The clinical director, service chief, or equivalent must meet the training and experience requirements for examination by the American Board of Psychiatry and Neurology or the American Osteopathic Board of Neurology and Psychiatry.	MS.17.01.03	The hospital collects information regarding each physician's or other licensed practitioner's current license status, training, experience, competence, and ability to perform the requested privilege.
		EP 6	For psychiatric hospitals that use Joint Commission accreditation for deemed status purposes: Inpatient psychiatric services are under the direction and supervision of a clinical director, service chief, or equivalent who is qualified to provide the leadership required for an intensive treatment program and who meets the training and experience requirements for examination by the American Board of Psychiatry and Neurology or the American Osteopathic Board of Neurology and Psychiatry. The number and qualifications of doctors of medicine and osteopathy are adequate to provide essential psychiatric services.

CFR Number §482.62(b)(2)	Medicare Requirements	Joint Commission Equivalent Number	Joint Commission Standards and Elements of Performance
§482.62(b)(2) TAG: A-1693	(2) The director must monitor and evaluate the quality and appropriateness of services and treatment provided by the medical staff.	MS.16.01.01	The organized medical staff oversees the quality of patient care, treatment, and services provided by physicians and other licensed practitioners privileged through the medical staff process.
		EP 8	For psychiatric hospitals that use Joint Commission accreditation for deemed status purposes: The clinical director, service chief, or equivalent for inpatient psychiatric services monitors and evaluates the medical staff's treatment and services for quality and appropriateness.
§482.62(c) TAG: A-1695	§482.62(c) Standard Availability of Medical Personnel Doctors of medicine or osteopathy and other appropriate professional personnel must be available to provide necessary medical and surgical diagnostic and treatment services. If medical and surgical diagnostic and treatment services are not available within the institution, the institution must have an agreement with an outside source of these services to ensure that they are immediately available or a satisfactory agreement must be established for transferring patients to a general hospital that participates in the Medicare program.	NPG.12.03.01	For psychiatric hospitals that use Joint Commission accreditation for deemed status purposes: The psychiatric hospital develops and implements staffing plans according to law and regulation.
		EP 5	For psychiatric hospitals that use Joint Commission accreditation for deemed status purposes: Doctors of medicine or osteopathy and other appropriate professional staff are available to provide necessary medical and surgical diagnostic and treatment services. If medical and surgical diagnostic and treatment services are not available within the hospital, the hospital has an agreement with an outside source for these services to ensure that they are immediately available, or the hospital establishes an agreement for transferring patients to a general hospital that participates in the Medicare program.
§482.62(d) TAG: A-1700	§482.62(d) Standard: Nursing services. The hospital must have a qualified director of psychiatric nursing services. In addition to the director of nursing, there must be adequate numbers of registered nurses, licensed practical nurses, and mental health workers to provide nursing care necessary under each patient's active treatment program and to maintain progress notes on each patient.	HR.11.02.01	The hospital defines and verifies staff qualifications.
		EP 2	For psychiatric hospitals that use Joint Commission accreditation for deemed status purposes: The hospital has a director of psychiatric nursing that is a registered nurse who has a master's degree in psychiatric or mental health nursing, or its equivalent, from a school of nursing accredited by the National League for Nursing or is qualified by education and experience in the care of the mentally ill. The director of psychiatric nursing demonstrates competence to participate in interdisciplinary formulation of individual treatment plans; to give skilled nursing care and therapy; and to direct, monitor, and evaluate the nursing care provided.
		NPG.12.03.01	For psychiatric hospitals that use Joint Commission accreditation for deemed status purposes: The psychiatric hospital develops and implements staffing plans according to law and regulation.
		EP 4	For psychiatric hospitals that use Joint Commission accreditation for deemed status purposes: There is an adequate number of qualified professional, technical, and consultative staff (including but not limited to doctors of medicine and/or osteopathy, registered nurses, licensed practical nurses, and mental health workers) to do the following: <ul style="list-style-type: none"> • Evaluate patients • Formulate written individualized, comprehensive treatment plans • Provide active treatment measures • Engage in discharge planning • Provide the nursing care necessary under each patient's active treatment program • Maintain progress notes on each patient • Provide essential psychiatric services
§482.62(d)(1) TAG: A-1701	(1) The director of psychiatric nursing services must be a registered nurse who has a master's degree in psychiatric or mental health nursing, or its equivalent from a school of nursing accredited by the National League for Nursing, or be qualified by education and experience in the care of the mentally ill.	HR.11.02.01	The hospital defines and verifies staff qualifications.
		EP 2	For psychiatric hospitals that use Joint Commission accreditation for deemed status purposes: The hospital has a director of psychiatric nursing that is a registered nurse who has a master's degree in psychiatric or mental health nursing, or its equivalent, from a school of nursing accredited by the National League for Nursing or is qualified by education and experience in the care of the mentally ill. The director of psychiatric nursing demonstrates competence to participate in interdisciplinary formulation of individual treatment plans; to give skilled nursing care and therapy; and to direct, monitor, and evaluate the nursing care provided.

CFR Number §482.62(d)(1)	Medicare Requirements	Joint Commission Equivalent Number	Joint Commission Standards and Elements of Performance
§482.62(d)(1)	TAG: A-1702	HR.11.02.01	The hospital defines and verifies staff qualifications.
(1) The director must demonstrate competence to participate in interdisciplinary formulation of individual treatment plans; to give skilled nursing care and therapy; and to direct, monitor, and evaluate the nursing care furnished.		EP 2	For psychiatric hospitals that use Joint Commission accreditation for deemed status purposes: The hospital has a director of psychiatric nursing that is a registered nurse who has a master's degree in psychiatric or mental health nursing, or its equivalent, from a school of nursing accredited by the National League for Nursing or is qualified by education and experience in the care of the mentally ill. The director of psychiatric nursing demonstrates competence to participate in interdisciplinary formulation of individual treatment plans; to give skilled nursing care and therapy; and to direct, monitor, and evaluate the nursing care provided.
§482.62(d)(2)	TAG: A-1704	NPG.12.03.01	For psychiatric hospitals that use Joint Commission accreditation for deemed status purposes: The psychiatric hospital develops and implements staffing plans according to law and regulation.
(2) There must be adequate numbers of registered nurses, licensed practical nurses, and mental health workers to provide the nursing care necessary under each patient's active treatment program.		EP 4	For psychiatric hospitals that use Joint Commission accreditation for deemed status purposes: There is an adequate number of qualified professional, technical, and consultative staff (including but not limited to doctors of medicine and/or osteopathy, registered nurses, licensed practical nurses, and mental health workers) to do the following: <ul style="list-style-type: none"> • Evaluate patients • Formulate written individualized, comprehensive treatment plans • Provide active treatment measures • Engage in discharge planning • Provide the nursing care necessary under each patient's active treatment program • Maintain progress notes on each patient • Provide essential psychiatric services
§482.62(d)(2)	TAG: A-1703	NPG.12.03.01	For psychiatric hospitals that use Joint Commission accreditation for deemed status purposes: The psychiatric hospital develops and implements staffing plans according to law and regulation.
(2) The staffing pattern must insure the availability of a registered professional nurse 24 hours each day.		EP 2	For psychiatric hospitals that use Joint Commission accreditation for deemed status purposes: The hospital makes certain a registered professional nurse is available 24 hours a day.
§482.62(e)	TAG: A-1710	LD.13.03.01	The hospital provides services that meet patient needs.
§482.62(e) Standard: Psychological services. The hospital must provide or have available psychological services to meet the needs of the patients.		EP 18	For psychiatric hospitals that use Joint Commission accreditation for deemed status purposes: The hospital provides psychological services, social work services, psychiatric nursing, and therapeutic activities to meet the needs of its patients. Note: The therapeutic activities program is appropriate to the needs and interests of patients and is directed toward restoring and maintaining optimal levels of physical and psychosocial functioning.
§482.62(f)	TAG: A-1715	NPG.12.03.01	For psychiatric hospitals that use Joint Commission accreditation for deemed status purposes: The psychiatric hospital develops and implements staffing plans according to law and regulation.
§482.62(f) Standard: Social services. There must be a director of social services who monitors and evaluates the quality and appropriateness of social services furnished. The services must be furnished in accordance with accepted standards of practice and established policies and procedures.		EP 6	For psychiatric hospitals that use Joint Commission accreditation for deemed status purposes: The hospital has a director of social services who monitors and evaluates the quality and appropriateness of social services. Note: Social services are provided in accordance with accepted standards of practice and established policies and procedures.
§482.62(f)(1)	TAG: A-1716	HR.11.02.01	The hospital defines and verifies staff qualifications.
(1) The director of the social work department or service must have a master's degree from an accredited school of social work or must be qualified by education and experience in the social services needs of the mentally ill. If the director does not hold a masters degree in social work, at least one staff member must have this qualification.		EP 5	For psychiatric hospitals that use Joint Commission accreditation for deemed status purposes: The director of social services has a master's degree from an accredited school of social work or is qualified by education and experience in the social services needs of the mentally ill. Note: If the director does not hold a master's degree in social work, at least one staff member has this qualification.

CFR Number §482.62(f)(2)	Medicare Requirements	Joint Commission Equivalent Number	Joint Commission Standards and Elements of Performance
§482.62(f)(2)	TAG: A-1717	PC.14.01.01	The hospital follows its process for discharging or transferring patients.
(2) Social service staff responsibilities must include, but are not limited to, participating in discharge planning, arranging for follow-up care, and developing mechanisms for exchange of appropriate, information with sources outside the hospital.		EP 4	The patient, the patient's caregiver(s) or support person(s), physicians, other licensed practitioners, clinical psychologists, and staff who are involved in the patient's care, treatment, and services participate in planning the patient's discharge or transfer. The patient and their caregiver(s) or support person(s) are included as active partners when planning for postdischarge care. Note 1: The definition of "physician" is the same as that used by the Centers for Medicare & Medicaid Services (refer to the Glossary). Note 2: For hospitals that use Joint Commission accreditation for deemed status purposes and have swing beds: The hospital notifies the resident and, if known, a family member or legal representative of the resident of the transfer or discharge and reasons for the move. The notice is in writing, in a language and manner they understand, and includes the items described in 42 CFR 483.15(c)(5). The hospital also provides sufficient preparation and orientation to residents to make sure that transfer or discharge from the hospital is safe and orderly. The hospital sends a copy of the notice to a representative of the office of the state's long-term care ombudsman.
§482.62(g)	TAG: A-1720	LD.13.03.01	The hospital provides services that meet patient needs.
§482.62(g) Standard: Therapeutic activities. The hospital must provide a therapeutic activities program.		EP 18	For psychiatric hospitals that use Joint Commission accreditation for deemed status purposes: The hospital provides psychological services, social work services, psychiatric nursing, and therapeutic activities to meet the needs of its patients. Note: The therapeutic activities program is appropriate to the needs and interests of patients and is directed toward restoring and maintaining optimal levels of physical and psychosocial functioning.
§482.62(g)(1)	TAG: A-1725	LD.13.03.01	The hospital provides services that meet patient needs.
(1) The program must be appropriate to the needs and interests of patients and be directed toward restoring and maintaining optimal levels of physical and psychosocial functioning.		EP 18	For psychiatric hospitals that use Joint Commission accreditation for deemed status purposes: The hospital provides psychological services, social work services, psychiatric nursing, and therapeutic activities to meet the needs of its patients. Note: The therapeutic activities program is appropriate to the needs and interests of patients and is directed toward restoring and maintaining optimal levels of physical and psychosocial functioning.
§482.62(g)(2)	TAG: A-1726	NPG.12.03.01	For psychiatric hospitals that use Joint Commission accreditation for deemed status purposes: The psychiatric hospital develops and implements staffing plans according to law and regulation.
(2) The number of qualified therapists, support personnel, and consultants must be adequate to provide comprehensive therapeutic activities consistent with each patient's active treatment program.		EP 3	For psychiatric hospitals that use Joint Commission accreditation for deemed status purposes: The number of qualified therapists, support personnel, and consultants is adequate to provide therapeutic activities consistent with each patient's active treatment program.