

G546

(Rev. 219; Issued: 04-12-24; Effective: 04-12-24; Implementation: 04-12-24)

[§484.55(d) Standard: Update of the comprehensive assessment...not less frequently than-]

(1) The last 5 days of every 60 days beginning with the start-of-care date, unless there is a-

(i) Beneficiary elected transfer;

(ii) Significant change in condition; or

(iii) Discharge and return to the same HHA during the 60-day episode.