***Practice Name:***

**Address:**

Policy dated 4/3/2017

**Process for Identification and Follow-up of Hospitalized Patients**

CC-14

1. Asking patients about hospitalizations during their visit is part of our triage and examination process. It is asked during every visit. This is done with the intention of verifying if we were not informed about the patient’s hospitalization or ER visit from the hospital or insurance carrier.

CC-19

1. When the patient is seen in the office, copies of the patient’s discharge documents, and any other pertinent documents are scanned into the patient’s electronic medical record. If the patient did not bring the discharge documents with them, we reach out to the hospital to obtain a copy.

CC-15

1. Patient information will be exchanged with any hospital or other urgent care facility that submits a request. This information will be shared electronically if at all possible.

CC-19

1. Once one of our patients goes to the emergency room, a report is generated and faxed, or mailed to us according to previous agreements that we have with local hospitals. The reports indicate the reason for the visit, any diagnostic tests done, diagnosis and treatment provided as well as recommendations for follow-up.
2. When we receive a call from a hospital regarding a patient being seen in the ER or as an in-patient, the following occurs:

CC-14, CC-16, CC-17

* 1. During regular office hours: we call the patient in order to make a follow up appointment with the patient’s PCP at the patient’s earliest convenience. Both the call from the hospital, as well as the call to the patient are recorded as a telephone encounter in our EMR.
  2. After regular office hours: our designated call recipient receives the call, and makes a notation of the time and the information. The next morning this information is conveyed to the front desk staff, who calls the patient in order to make a follow up appointment with the patient’s PCP at the patient’s earliest convenience. Both the call from the hospital, as well as the call to the patient are recorded as a telephone encounter in our EMR.

**Process for Proper Consent to Release Protected Health Information (PHI) and secure exchange of Information**

1. Ask patient to sign consent to release document and scan into patient electronic record.
2. Transmit signed document to outside partners via secure fax or secure electronic transmission.
3. Receive information via secure fax or secure electronic transmission.

**This is the methodology by which we are informed that a patient has been seen in a hospital:**

CC-14

1. Patients insurances alert us when a patient has been in a hospital/ER.
2. Providers/MA at hospital/ER will call the clinic requesting medical information.
3. Hospitals will make a follow up appointment after discharge.