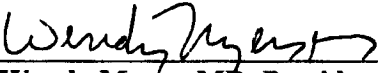


FLORIDA HEALTH CARE PLAN, INC.

1340 Ridgewood Ave., Holly Hill, FL 32117

POLICY/PROCEDURE NO.: MGP034 **REVISION:** 2
SUBJECT: Inpatient Discharge Follow-Up
EFFECTIVE DATE: November 1, 2007
REVIEW/REVISION DATE: February 22, 2009
ATTACHMENT (S): (0)
FORMULATED BY: June Christiansen, R.N, Acting Administrator of Practice
Management & Special Projects Manager
LEADERSHIP APPROVAL: 
Wendy Myers, MD, President/Chief Medical Officer

POLICY:

It is the policy of Florida Health Care Plans that patients who have been hospitalized as an inpatient due to a medical, surgical or psychiatric illness will have timely follow up by their primary care physician, surgeon or psychiatrist.

PROCEDURE:

The following procedures are the expectations for patient care following an inpatient admission:

I. Discharge from Hospital Inpatient (Medical)

1. If the patient did not see their Primary Care Physician (PCP) while they were in the hospital as an inpatient for medical concerns, they will need a follow-up appointment upon discharge, **no later than 14 days from discharge with PCP or Specialist.**
2. The physician who rounds on the patient in the hospital should write an order to fax the medication reconciliation sheet/ or discharge medication sheet to the PCP or dictate the discharge note with meds included.
3. The PCP should review all medications, dosages and update the outpatient medication list to reflect the current medication regimen.
4. The PCP Office in conjunction with the Call Center should ensure that patients obtain follow up appointments.

II. Discharge from Hospital Inpatient (Surgical)

1. The patient that has been discharged from the hospital shall be seen by the surgeon within 14 days.

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2. The physician who rounds on the patient in the hospital shall write an order to fax the medication reconciliation sheet or discharge medication sheet to the office of the provider following the patient.
3. The surgeon shall review all the medications, dosages and update the medications reconciliation sheet to reflect the current medication regimen. A copy of the documentation of the reconsolidated medication regimen shall be forwarded to the PCP office.

III. Discharge from Inpatient (Psychiatric)

1. Patients that have been discharged from a Psychiatric Facility should be seen by a Psychiatrist within **7 days of discharge**.
2. The patient should sign a Records Release form at the discharge to ensure that records can be sent to the PCP and Psychiatrist for follow up.
3. The physician who rounds on the patient in the hospital should write an order to fax the medication reconciliation sheet/ or discharge medication sheet to the Psychiatrist.
4. The Psychiatrist should review all medications, dosages and update the medication list to reflect the current medication regimen. A copy of the documentation of the reconciled medication regimen shall be forwarded to the PCP office.

IV. Discharge from In-Patient to Skilled Nursing Facility (SNF)

1. Patients who have been discharged from an Inpatient hospital to a Skilled Nursing Facility (SNF), should have a visit within **72 hours of discharge unless the hospital attending physician is also the SNF physician, then the patient will have a visit within 5 days**.
2. The discharge summary should be dictated stat and sent with the patient to the SNF.
3. The ordering physician or their covering physician must confirm the SNF orders and make a hand off to the receiving physician.

V. Discharge from SNF or Rehabilitation to Home

1. Patients who have been discharged from a SNF or Rehabilitation should have a visit **within 14 days of discharge with their PCP**.
2. Medication reconciliation sheet or discharge medication list will be sent to the PCP at discharge along with H & P by SNF MD and any pertinent notes. The FHCP SNF Case Manager is responsible for this transfer of information to the PCP.

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3. SNF physician will call or dictate a note to the PCP for significant discharge needs.

VI. Discharge from Home Health Care.

1. Patients who are discharged from Home Health Care should have a follow up visit within **14 days of the discontinuation of services unless already seen by their PCP or treating physician during their Home Health treatment.**
2. The medication sheet should be sent to the PCP at discharge.
The FHCP Home Health Case Manager is responsible to make sure the medication reconciliation sheet is sent to the PCP.