

SULLIVAN COUNTY PUBLIC HEALTH SERVICES

POLICY: REFERRAL PROCESS: GUIDELINES REGARDING THE REFERRAL PROCESS ARE ADHERED TO BY ALL STAFF.

PURPOSE: To provide guidelines for obtaining and accepting patient referrals for home health care.

RESPONSIBLE PARTY: RN, PT, OT, ST, Intake staff

Original

Approval: 9/99

Reviewed: 9/99

Revised: 1/05

Revised: 5/05

Revised: 12/15

Revised 2/22

REFERENCE(S): 48 CFR 763.5(a)

PROCEDURE:

1. Incoming referrals:

- a) Referrals are received by a Registered Nurse (RN).
- b) If a patient has been inpatient in a hospital, rehab or nursing facility, the Intake Nurse may request a discharge conference prior to accepting the referral.
- c) If the referral is identified as located outside Sullivan County, Intake staff will inform the referral source that the agency cannot accept the referral or provide services to that patient. If the referral source subsequently verifies that they cannot locate another agency which will agree to provide services for that patient, Intake staff must contact the CHHAs in the county of the patient's residence to inform them of the referral and to verify that no CHHAs licensed to provide services in that county will provide them in this case.
 - a. If there are no CHHAs willing to provide services in that patient's county, Sullivan County Public Health Services must submit a formal written request by mail (not email) explaining the reason we must provide the services (instead of the CHHAs in the county where the patient lives) to the Regional MARO Office to the attention of Michael Pankov. The address is MARO, 90 Church St, 15th Floor New York, Ny 10007. Mr. Pankov's phone number is 212-417-4921, and the Regional Office can also be emailed at marohomecare@health.ny.gov. Permission can be granted on a case by case basis.
- d) Intake Staff will confirm that the MD will sign home care orders, check that the MD is PECOS and Medicaid enrolled via www.hmedata.com and/or eMedNY, confirm if there is a completed Face to Face document, confirm MD address, phone and fax numbers, obtain patient demographics, current medication list and a History and Physical, complete an IV flow sheet or detailed description of wound care or procedures (as applicable), enter all pertinent information into the Electronic Medical Record (EMR) & create a physical chart. The Intake Nurse will diligently pursue all needed elements to assemble as complete a referral as possible and will document communications. When the referral is complete and referral criteria are met, Intake nurse will write orders for a nursing evaluation, assign and schedule the case, and add it to the appropriate Log(s).
- e) Billing staff will verify and sequence insurance as well as request authorization when needed.
- f) A Licensed Clinician will conduct an assessment within 24-48 hours of referral unless otherwise requested by a physician's order or by patient's preference. The clinician scheduled for the assessment and/or the Intake Nurse will document all communications in the patient's record and notate the specific reason admission is delayed. The patient and the physician will be notified of any delays.