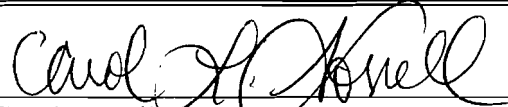





**KERN HEALTH SYSTEMS
POLICIES AND PROCEDURES**

SUBJECT: Facility Transfers		INDEX NUMBER 3.19-P		Page 1 of 3			
RESPONSIBLE DEPARTMENT HEAD: Director of Health Services							
Review Date	07/1999	06/2000	02/2002	03/2007	06/2009		
Effective Date			02/01/03	04/02/07	07/01/09		
Revision No.	1999-07	2000-06	2002-07	2007-04	2009-06		

Approved	 Carol Sorrell, R.N. Chief Executive Officer	Date	6/29/09
Approved	 Assistant Medical Director	Date	6-29-09
Approved	 Director of Health Services	Date	6-23-09
Approved	 Director of Quality Improvement, Health Education & Disease Management	Date	6-22-09

POLICY¹:

Kern Health Systems (KHS) members may need to be transferred from one facility to another to achieve an appropriate (higher) level of care or to place the member in a contracted facility. Regardless of the purpose for the transfer, KHS will comply with all COBRA regulations. To maximize member safety during transfers between facilities, the treating physician must determine, with reasonable clinical confidence that the member is expected to leave the hospital and be received at the second facility with no material deterioration in his/her medical condition. The treating physician must reasonably believe that the receiving facility has the capability to manage the member's medical condition and any likely complication of that condition.

PURPOSE:

To establish guidelines that will promote member safety when the determination has been made by the treating physician and KHS to transfer KHS members to another facility.

PROCEDURE:

1.0 TRANSFER PROCESS

The admitting hospital/physician must notify KHS of the admission of a KHS Plan member. If

**KERN HEALTH SYSTEMS
POLICIES AND PROCEDURES**

SUBJECT: Facility Transfers	INDEX NUMBER 3.19-P	Page 2 of 3
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transfer of the member is necessary, the physician of record will direct the transfer of the KHS member from one facility to another in the following manner:

- A. Notify KHS by calling 661 664-5083 during business hours.
- B. Ascertain that all COBRA regulations have been met and the patient is medically stable prior to transfer. The physician must determine that the proposed transfer will not, within reasonable medical probability, create a material deterioration in or jeopardize the patient's medical conditions or expected chances for recovery.
- C. Maintain direct communication with the accepting physician at the other facility and relay sufficient information to direct the transfer in a manner that promotes patient safety and continuity of care. The physician must secure acceptance of the transfer by a physician at the receiving facility and arrange a tentative transfer date and time.
- D. Respond appropriately to the accepting physician's request for all pertinent medical records and copies of the results of diagnostic tests. The transferring physician must include a Transfer Summary to accompany the patient's medical records.
- E. Make arrangements for a type of transportation that meets the level of care necessary for a safe transfer of the member. KHS Utilization Management (UM) staff is available to assist in identifying appropriate contracted transportation providers.
- F. The transferring physician will provide an explanation to the patient of the reason for the transfer prior to the tentative transfer taking place. The transferring facility must obtain written consent to transfer from the member (or a person acting on his or her behalf) prior to the transfer. If the member refuses, the facility must take all reasonable steps to secure the member's written informed refusal.
- G. The accepting physician will arrange for admission and the appropriate level of care at the receiving facility.

UM staff is available to assist the transferring physician at any time with the above activities.

2.0 TRACKING AND DOCUMENTATION

If, during the course of concurrent inpatient review, the Nurse Case Manager becomes aware that an unusual/adverse event had occurred during facility transfer of the member, the Nurse Case Manager will report the event to KHS' Associate Medical Director for his disposition. The Nurse Case Manager will also report the event to the Quality Improvement Department.

3.0 AFTER HOURS TRANSFERS

For transfers that need to be made during times other than regular business hours, the transferring physician or facility must notify the KHS Administrator-on-Call, cell # (661) 331-7656. The Administrator-on-Call works with the transferring facility to be certain that when possible, the transportation is provided by a contracted provider and that the receiving facility is a contracted provider.

**KERN HEALTH SYSTEMS
POLICIES AND PROCEDURES**

SUBJECT: Facility Transfers

INDEX NUMBER
3.19-P

Page 3 of 3

4.0 EMERGENCY TRANSFERS

If the patient's clinical condition is severe enough that any delay in transfer would adversely affect the outcome of the medical condition, the transferring physician and/or the transferring facility may proceed with the transfer without waiting to make contact with KHS. However, whenever possible, KHS contract providers should be used to provide care for the member.

The transferring facility must notify KHS of the transfer immediately afterwards.

All such cases will be retrospectively reviewed to be certain that the clinical condition warranted the transfer without KHS notification and approval.

¹ **Revision 2009-06:** Revised by UM Supervisor. **Revision 2007-04:** Policy revised as requested by Provider Relations Manager. AIS/Compliance has not reviewed for regulatory compliance. **Revision 2002-07:** Annual review. Revised per 9/19/01 DHS Comment. **Formerly:** #2.06. Changed to UM section per Medical Director request.