



POLICY TITLE: Patient Event Notification Policy	SYSTEM POLICY AND PROCEDURE MANUAL
POLICY #: 800.25	CATEGORY: Compliance and Ethics
System Approval Date: 4/25/2024	Effective Date: 08/25/2022
Site Implementation Date: 6/03/2024	Last Reviewed/Approved: 09/2022
Prepared by: Office of Corporate Compliance	Notations:

GENERAL STATEMENT of PURPOSE

The purpose of this policy is to ensure Northwell Health's compliance with CMS regulations set forth at 42 CFR 482.24(d)(5) and 482.61(f)(5), which require reasonable efforts to notify applicable providers upon certain admissions, discharges and transfers for the purposes of treatment, care coordination, or quality improvement purposes. This policy applies to all facilities operated by Northwell Health affiliates that are participating hospitals or psychiatric hospitals in the Medicare or Medicaid program. Such facilities are referred to in this policy as "Institutions."

POLICY STATEMENT

It is the policy of Northwell Health that it will make reasonable efforts to comply with CMS regulations and provide notification to appropriate individuals and/or Institutions upon certain admissions, discharges and transfers.

SCOPE

This policy applies to all Northwell employees, as well as medical staff, volunteers, students, trainees, physician office staff, contractors, trustees and other persons performing work for or at Northwell; faculty and students of the Donald and Barbara Zucker School of Medicine at Hofstra/Northwell or the Hofstra Northwell School of Nursing and Physician Assistant Studies conducting research on behalf of the Zucker School of Medicine on or at any Northwell facility.

DEFINITIONS

HL7: the Health Level Seven International standards, formats and definitions for exchanging and developing electronic health records promulgated by the healthcare IT standard-setting authority HL7 International.

PROCEDURE

When Notifications Must be Sent

Each Institution must make a reasonable effort to send a patient event notification (a “Notification”):

1. At the time of the patient’s registration at or admission to the emergency department.
2. Immediately prior to or at the time of the patient’s discharge or transfer from the emergency department.
3. At the time of the patient’s admission to an inpatient unit.
4. Immediately prior to or at the time of the patient’s discharge or transfer from an inpatient unit to another facility.

Conditions for Sending Notifications

Compliance with Law.

- An Institution may send a Notification only to the extent permissible under applicable federal and state privacy laws and regulations.
- While the HIPAA privacy rule generally does not require a patient’s authorization for the transmission of Notifications, Section 33.13 of the New York Mental Hygiene Law (“MHL”) will usually require patient consent for Notifications sent by psychiatric hospitals or psychiatric units of general hospitals licensed under the MHL. Likewise, 42 CFR Part 2 will usually require patient consent for Notifications sent by federally assisted alcohol or substance use treatment programs. If a privacy law such as MHL 33.13 or 42 CFR Part 2 requires the patient to consent to the transmission of the Notification, the Institution may not send the Notification without the patient’s consent. The Institution will use Northwell’s standard consent form covering mental health and substance use information for this purpose. The Institution is not required to make affirmative efforts to obtain patient consent.
- The Institution will establish controls in its electronic health record (“EHR”) to enable Notifications by facilities subject to MHL 33.13 or 42 CFR Part 2 only with patient consent.

Patient Preference.

- If a patient requests that Notifications not be sent to any provider(s), the Institution must make reasonable efforts to abide by that request.
- A patient may request that Notifications not be sent (i) to one or more particular providers, (ii) to all providers with respect to a particular admission or (iii) to all providers with respect to all admissions.

- Northwell will develop a patient preference form that can be used by Institutions for this purpose. Patient requests may be implemented through various controls including, but not exclusive to, the EHR and/or Health Information Exchange (“HIE”).
- Each Institution will include information describing when and to whom Notifications are issued in each patient’s Consent for Admission and Treatment. Institutions are not required to educate patients about their right to opt out of receiving Notifications. Institutions will include a reference to this opt out right in the Consent for Admission and Treatment.

To Whom Notifications Must be Sent

Each Institution must make a reasonable effort to ensure that Notifications are sent to the following providers (collectively, “Treating Providers”):

- To all post-acute care service providers and suppliers (i) with which the patient has an established care relationship prior to admission that is relevant to the services being provided to the patient by the Institution or (ii) to which the patient is being referred by the Institution; and
- Any of the following practitioners and entities that need to receive notification of the patient’s status for treatment, care coordination or quality improvement purposes:
 - The patient’s established primary care practitioner;
 - The patient’s established primary care practice group or entity; or
 - Other practitioner, or other practice group or entity, identified by the patient as the practitioner, or practice group or entity, primarily responsible for the patient’s care.

Reasonable efforts will include, to the extent feasible, accessing information about post-acute care providers and suppliers from a commercial partner with data on post-acute services used by patients and information about practitioners primarily responsible for a patient’s care from internal data systems.

Each Institution will make a reasonable effort to request that patients identify any Treating Providers during the admission or discharge process. Staff will document in the EHR any Treating Providers identified by the patient. Notifications will be sent to all Treating Providers listed in the EHR or accessed from the applicable commercial partner or internal data systems unless the Institution cannot verify a Treating Provider’s identity or electronic address to ensure Notifications will be received.

Nothing in this policy shall restrict Northwell facilities from sending notifications regarding a patient’s status to physicians or other health care providers not specified in this policy who have a treatment relationship with the patient to the extent permissible under applicable law.

Content of Notifications

Notifications must include, at a minimum, the name of the patient, treating practitioner (if known department) and sending Institution.

Format of Notification

Notifications must be sent electronically in the HL7 2.5.1 format or any other format adopted by the Institution. Notifications will be sent through the EHR and/or the HIE.

REFERENCES to REGULATIONS and/or OTHER RELATED POLICIES

N/A

CLINICAL REFERENCES/PROFESSIONAL SOCIETY GUIDELINES

N/A

ATTACHMENTS

N/A

FORMS

N/A

<u>APPROVAL:</u>	
Northwell Health Policy Committee	3/26/2024
System PICG/Clinical Operations Committee	4/25/2024

Standardized Versioning History:

Approvals: * =Northwell Health Policy Committee; ** = PICG/Clinical Operations Committee; ☒ = Provisional; ❖ = Expedited

*08/25/22

**09/15/22