

Procedure: Medical Staff Privileges for Community Providers in In-Patient Units

Approved By:
Chief Medical Officer

Effective Date:
06/11/2018

This Procedure is applicable to the following Chapters Health System organization or organizations (the "Organization(s)"): Chapters Health Palliative Care, Chapters Health Pharmacy, Chapters Health Staffing, Chapters Health System, Good Shepherd Hospice, HPH Hospice, LifePath Hospice

Purpose: Community providers shall be allowed to continue medical management of their patients admitted to any Chapters Health Hospice Affiliate, Inpatient Unit (IPU). Patients who are receiving care at Chapters Health Hospice Affiliate in-patient facilities will be followed by the LPH/GSH/HPH medical staff in either an attending physician or consulting role.

Procedure:

1. A provider who is a current member of the staff of a local hospital may be the attending or consulting physician for his/her patient in the IPU. Before (s)he can follow the patient, the following should take place within two business days:
 - a. An Application for Medical Privileges at the Chapters Health Hospice Affiliate, along with a signed Confidentiality and Security Agreement, must be submitted and approved by the Chief Medical Officer or Designee.
 - b. Medical Services shall verify licensure, malpractice coverage, OIG exclusion and local hospital privileges, including expiration date.
 - c. The Chapters Health Chief Medical Officer/designee shall review and approve the community provider's inpatient unit privileges.
 - d. Clinical privileges for the IPU are granted to the community provider.
 - e. Medical Services completes CIT User Request Form requesting provider access to Citrix and the electronic medical record (EMR). The request is copied to the appropriate affiliate Medical Director.
2. After completing the IPU Attending/Consulting Provider Education Packet, a community provider who has been designated the inpatient attending physician will provide care and document in accordance with Chapters Health System standards including:
 - a. Completion of a history and physical and daily notes on each patient under the inpatient level of care as required.
 - b. Documentation must be completed, entered into the EMR and signed on the day of service.
 - c. Verbal orders must be signed within twenty-four (24) hours.
 - d. An ARNP must be the attending and not the consulting provider in order to be reimbursed for hospice services.
 - e. An ARNP applying for privileges in the IPU must provide the name of his/her supervising physician.
 - f. The supervising physician of an ARNP serving as the attending physician for hospice patient(s) in the IPU must also be credentialed by CHS.
3. A community physician who is serving in a consulting capacity for a IPU patient shall:
 - a. Complete documentation of all encounters on the date of service.
 - b. Document into the hospice EMR or
 - c. Document into an alternate EMR or Word Document and provide a copy of the completed document to the IPU staff. HIM/Department Secretary will scan the document and send both the hard copy and the electronic copy to HIM for entry into the document management system, On Base.
 - d. Elect to review the IPU Attending/Consulting Provider Education Packet (optional).
4. All providers must handle all orders in a timely manner as required by Laws and Regulations. There are several ways a provider may place an order.

- a. The provider may submit the order electronically through any acceptable electronic prescription network to the Chapters Pharmacy.
 - b. If the provider does not have access to a compatible e-prescribing network such as DrFirst or Surescripts, dispensing prescriptions may be sent via facsimile to the Chapters Pharmacy at 888-238-4008.
 - c. All scanned or faxed order images received by pharmacy will be stored in the pharmacy dispensing software system, Guardian.
 - d. If neither electronic prescribing nor communication via facsimile is possible, the provider may provide a verbal order to a pharmacist at Chapters Pharmacy by dialing 813-353-8573. A verbal order for a CII medication can be accepted in an emergency situation.
 - i. If the verbal order(s) is/are for CII medication(s), the quantity ordered should be limited to a 3-4 day supply.
 - ii. It is the responsibility of the prescriber to provide the pharmacy with a properly executed and signed prescription(s) for the drug(s) within three days.
 - e. All prescriptions whether originating via facsimile, electronic means or verbally, must be either:
 - i. signed by the prescriber in the EMR, or
 - ii. printed-out, signed by the provider, and scanned into the document management system, OnBase.
5. The Hospice Affiliate Medical Staff provider will be involved in the care of all hospice affiliate patients at the inpatient unit, either in an attending physician or consulting physician role. If a community provider is acting as the attending, hospice medical staff will be consulted for pain and symptom management, and to determine ongoing eligibility for general inpatient (GIP) level of care.
 6. When serving as attending physician, the community provider shall visit his/her patient in the inpatient unit daily. Providers agree to have the medical needs of their patients provided by the hospice medical staff if (s)he or a designated covering provider is unavailable.
 7. A community provider may arrange for another community provider to provide coverage in his or her absence. The covering provider is also required to be privileged by Chapters Health System in order to provide cross coverage.
 8. If a patient in the IPU requires ventilator withdrawal, left ventricular assistive device (LVAD) deactivation, or paracentesis, the community provider must review the appropriate guideline or procedure with a member of the hospice Medical Staff prior to performing the procedure for the first time. Other medically indicated procedures may be performed by the Community Attending if approved by the Hospice Medical Director or designee.
 9. The Medical Director/designee shall oversee the medical care provided to all IPU patients and should evaluate medical practices as required for hospice staff or medical professionals.
 10. Provider Network and Contracting will send a contract to the community physician serving as a consulting physician in order to assure appropriate reimbursement.
 11. Medical Services Practice Manager/designee shall keep record of provider privileges with dates granting and expiration of privileges. He/she will contact the provider at least sixty (60) days prior to expiration of privileges every two years in order to verify his/her desire to retain privileges. If the provider elects to maintain privileges, privileging procedures will be repeated at that time.

Reference(s): None

Link(s): [Policy: Professional License Verification](#)