

<h1>PerformCARE</h1>		<h2>Policy and Procedure</h2>
Name of Policy:	Provider Notification to PerformCare of Inpatient Stays When Member has Other Primary Insurance	
Policy Number:	CM-020	
Contracts:	<input checked="" type="checkbox"/> All counties <input type="checkbox"/> Bedford / Somerset <input type="checkbox"/> Capital Area <input type="checkbox"/> Franklin / Fulton	
Primary Stakeholder:	Clinical Care Management Department	
Related Stakeholder(s):	All Departments	
Applies to:	Associates	
Original Effective Date:	01/01/04	
Current Effective Date:	01/01/04	
Last Revision Date:	None	
Last Review Date:	07/01/14	
Next Review Date:	07/01/15	

Policy: Providers will notify PerformCare of a Member’s admission and anticipated discharge date and plans from inpatient care when the PerformCare Member has other primary insurance.

Purpose: To establish a reporting practice for providers for Members admitted to inpatient with PerformCare as a secondary insurance.

Definitions: None

- Procedure:**
1. Providers will determine a patient’s insurance coverage upon inpatient admission.
 2. Providers will notify PerformCare, by contacting Member Services Staff, within one business day of admission and prior to the day of discharge of a Member who has PerformCare as secondary insurance.
 3. Providers will report the following information upon admission:
 - 3.1. Physical health plan coverage and any other primary insurance.
 - 3.2. Presenting Problem: (Clinical information / symptoms. Why Member needs requested level of treatment).
 - 3.3. Emergency contact information
 - 3.4. Can the Member return home following treatment (if applicable)
 4. Member Services Staff will notify the daytime on call Clinical

- Care Management email group of the admission.
5. The Clinical Care Manager who reviews with the facility where Member was admitted will notify the provider to include PerformCare in discharge planning since PerformCare may be responsible for aftercare treatment.
 6. Providers will notify PerformCare of the following prior to the day of discharge:
 - 6.1. Date of discharge
 - 6.2. Axis I- Axis II Diagnosis information
 - 6.3. Discharge plan (level of care, date, time and location of aftercare appointment). Members should be discharged with a *scheduled* aftercare appointment.
 - 6.4. Member's clinical symptoms, presentation and relevant situational information.

Related Policies: None

Related Reports: None

**Source Documents
and References:** None

**Superseded Policies
and/or Procedures:** None

Attachments: None

Approved by:



Primary Stakeholder