

ACCESS TO CARE, TELEPHONE AND APPOINTMENT SCHEDULING POLICIES

(Entire care team needs to read and ensure adherence of this policy)

Office Telephone & Fax Number

Phone #: (xxx) xxx-xxxx

After hours #: (xxx) xxx-xxxx

Fax #: (xxx) xxx-xxxx

Regular Office Hours:

Monday 8:30AM-5:00PM

Tuesday 8:30AM-5:00PM

Wednesday 8:30AM-5:00PM

Thursday 8:30AM-5:00PM

Friday 8:30AM-5:00PM

Saturday 8:30AM-12:00PM

Sunday 8:30AM-12:00PM

Responding to Patient Inquiries:

Ensure patients have telephone access 24/7. Answer all phone calls by the 3rd ring during office hours. Office hours are listed on answering machine. All patients have access to a physician or clinical decision maker 24 hours every day for the management of urgent and emergent conditions. Answering service is used when office is closed.

If a clinical phone call is answered by a non-clinical staff member, the staff member will:

1. **Not** answer clinical questions
2. Fill out a triage form/book to help the doctor assess the need and urgency of the patient's concerns
3. Inform the patient that the doctor will be with them shortly
4. Give the triage form/book to the medical assistant/healthcare provider who will then utilize office protocols to answer inquiry ASAP

Appointment Scheduling:

Schedule appointment to meet the patient's requests; with same-day access. Well care appointments may be made up to three months in advance. Sick appointments will be seen the same day.

Accommodate the patient whenever possible; it is the patient's choice. Encourage early morning appointments, if scheduling for another day. If the patient insists on a later time, schedule the appointment as requested (patient's choice!). Try not to schedule any further than two weeks out, since the no-show rate rises after that length of time.

Follow-up with a reminder notice (letter or call) if the scheduled appointment is not during the current week. Be sure the patient knows what he or she is required to do and/or bring for the appointment:

1. Medication list or medications/devices
2. Self-monitoring tools/results form
3. Goal sheet
4. Completion of medical tests

Coordinate other specialist's appointments and/or diagnostic tests whenever possible—usually the patient will schedule their own appointments. An authorization/referral will be faxed to the specialist within a 24 hour period.

Follow Up Post ER Visit:

Upon receipt of patient ER visit notice (either by fax or secure hospital connection); physician reviews documentation and instructs staff to either place a follow-up call to the patient, schedule patient for an appointment, or file notice in chart.

As part of this pilot your office is requested to consider:

1. Using a template letter (see enclosed) to communicate with patients after a primary care treatable ER visit.
2. Establish condition based follow-up program to actively address frequent ER use
i.e. **asthma** – office will call patient or caregiver after every ER visit to determine why needed and if any change to the care plan is necessary.