

530 MEMBER TRANSFERS BETWEEN FACILITIES

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REFERENCES: A.R.S. § 36-2909(B), 42 CFR 422.113, 42 CFR 438.114

Transfers Following Emergency Hospitalization

- A. Transfers initiated by the Administrative Services Subcontractors (AdSSs) of the Division of Developmental Disabilities (Division) between inpatient hospital facilities may be made when all of the following conditions are present:
1. The attending emergency physician, or the provider actually treating the member, determines that the member is sufficiently stabilized for transfer and will remain stable for the period of time required for the distance to be traveled. Such determination is binding on the AdSS responsible for coverage and payment. The AdSSs must comply with Medicaid Managed Care guidelines regarding the coordination of post stabilization care (42 CFR 438.114, 42 CFR 422.113).
 2. The receiving physician agrees to the member transfer.
 3. Transportation orders are prepared specifying the type of transport, training level of the transport crew, and level of life support.
 4. A transfer summary accompanies the member.
- B. Transfer to a lesser level of care facility (e.g. Tertiary to Secondary or Primary, or Secondary to Primary Hospital, or transfer to a Skilled Nursing Facility) may be made, when one or more of the following criteria are met:
1. Member's condition does not require full acute hospital capabilities, or
 2. Member's condition has stabilized or reached a plateau and will not benefit further from intensive intervention in the transferring facility, and
 3. The receiving physician agrees to a member transfer, and
 4. Transportation orders are prepared specifying the type of transport, training level of the transport crew and level of life support, and
 5. A transfer summary accompanies the member.
- C. For transfers initiated by the AdSSs, the attending emergency physician or the attending provider treating the member and the AdSSs Medical Director or designee is responsible for determining whether a particular case meets criteria established in policy. The Division Medical Director in the event of a request for a decision on the transfer of a particular member, the Division will apply the criteria listed in this subsection and A.R.S. 36-2020(B)

Neonate Transfers Between Acute Care Centers

Acutely ill neonates may be transferred from one acute care center to another, given certain conditions. The chart that follows provides the levels of care, conditions appropriate for transfer, and criteria for transfer.

LEVEL OF CARE		TRANSFER CRITERIA
FROM	TO	
PRIMARY	SECONDARY	<ol style="list-style-type: none"> 1. The nursing and medical staff of the sending hospital cannot provide: <ol style="list-style-type: none"> a. The level of care needed to manage the infant beyond stabilization to transport, or b. The required diagnostic evaluation and consultation services needed. 2. Transport orders are prepared which specify the type of transport, the training level of the transport crew and the level of life support. 3. A transfer summary accompanies the infant.
	TERTIARY	Same as above
SECONDARY	TERTIARY	Same as above
	PRIMARY	Same as below
TERTIARY	TERTIARY (RARE)	<ol style="list-style-type: none"> 1. The sending and receiving neonatologists (and surgeons, if involved) have spoken and have agreed that the transfer is safe. 2. The infant is expected to remain stable, considering the period of time required for the distance to be covered. 3. Transport orders are prepared which specify the type of transport, training level of the transport crew, and 4. A transfer summary accompanies the infant.
	SECONDARY	Same as above
	PRIMARY	Same as above