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530 MEMBER TRANSFERS BETWEEN FACILITIES

EFFECTIVE DATE: XX/XX/XXXX
REFERENCES: AMPM 530

PURPOSE

This policy establishes requirements for the Administrative Services Subcontractors (AdSS) regarding Division of Developmental Disabilities (Division) Member transfers between facilities.

DEFINITIONS

1. “Emergency” means a serious and unexpected situation requiring immediate action to avoid harm to health, life, property, or environment.
2. “Member” means the same as “Client” as defined in A.R.S. § 36-551.
3. “Primary Hospital” means hospitals that are licensed institutions with at least six beds whose primary function is to provide diagnostic and therapeutic patient services for medical conditions by an organized physician staff and have continuous nursing services under the supervision of registered nurses.

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26 4. "Secondary Hospital" means hospitals capable of providing the
27 majority of hospital based services, both general medical and
28 surgical, often Obstetrician (OB) and other services, but limited
29 with regards to specialist access.
- 30 5. "Tertiary Hospital" means hospitals with access to a broad range
31 of specialists and equipment necessary and usually receiving
32 their patients from a large catchment area and referral base.

33
34 **POLICY**

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36 **A. TRANSFER BETWEEN FACILITIES**

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38 1. The AdSS shall ensure coordination activity and data sharing is
39 required when a Member transitions between facilities and levels
40 of care. The methodology for data sharing is determined based
41 on the capability of each entity.
- 42 2. The AdSS shall ensure the following criteria are met when a
43 transfer is initiated by the AdSS between inpatient hospital
44 facilities following Emergency hospitalization:
- 45 a. The attending Emergency physician, or the attending
46 provider treating the Member, determines that the Member

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48 is stabilized for transfer and will remain stable for the
49 period of time required for the distance to be traveled.
50 Such determination is binding on the AdSS responsible for
51 coverage and payment;
- 52 b. The receiving physician agrees to the Member transfer;
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54 c. Transportation orders are prepared specifying:
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56 i. The type of transport,
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58 ii. Training level of the transport crew, and
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60 iii. Level of life support.
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62 d. A transfer summary accompanies the Member.
- 63 3. The AdSS shall comply with Medicaid Managed Care guidelines
64 regarding the coordination of post stabilization care as specified
65 in 42 CFR 438.114 and 42 CFR 422.113.
- 66 4. The AdSS shall ensure the following criteria are met when a
67 Member transfers to a lower level care facility:
- 68 a. The Member's condition does not require the full
69 capabilities of the transferring facility; or

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71 b. The Member's condition has stabilized or reached a plateau
72 and will not benefit further from intensive intervention in
73 the transferring facility; and
- 74 c. The receiving physician agrees to the Member transfer;
- 75 d. Transportation orders are prepared specifying the:
- 76 i. Type of transport,
- 77 ii. Training level of the transport crew, and
- 78 iii. Level of life support.
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- 80 e. A transfer summary accompanies the Member.
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- 82 5. The AdSS shall ensure the following criteria are met when a
83 Member transfers to a higher level of care facility:
- 84 a. The transferring hospital cannot provide the level of care
85 needed to manage the Member beyond stabilization
86 required to transport, or cannot provide the required
87 diagnostic evaluation and consultation services needed;
- 88 b. The receiving physician agrees to the Member transfer;
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94 c. Transport orders are prepared which specify the type of
95 transport, the training level of the transport crew and the
96 level of life support; and
97 d. A transfer summary accompanies the Member.
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99 6. The AdSS shall ensure when the transfer is initiated by the
100 AdSS, the attending Emergency physician, or the attending
101 provider treating the Member and the AdSS Medical Director or
102 designee are responsible for determining whether a particular
103 case meets criteria established in this policy.

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105 **SUPPLEMENTAL INFORMATION**
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107 Transfer to a lower level of care facility (e.g., Tertiary to Secondary or
108 Primary, or Secondary to Primary Hospital, or transfer to a skilled nursing
109 facility).
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112 Transfers to a higher level of care facility (e.g., Primary to Secondary or
113 Tertiary, or Secondary to Tertiary Hospital).
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120 Signature of Chief Medical Officer: