**PCMH AC-A**

**PCMH AC-B**

**Practice Name**

**Practice Address**

**Practice City, State, ZIP**

**Practice Phone**

# Policy – Patient Communications

**Purpose: To establish response time frames and documentation policy for telephone and electronic communications with patients/family and caregivers**

**AC-04, AC-05**

## A. Patient Phone Calls – During Office Hours

The designated physician, nurse or other clinician will provide telephone advice on clinical issues during office hours within the specified time frames below.

1. During office hours **urgent** calls are returned by a clinician within 15 minutes
2. Clinical staff will return non-urgent calls to patients for clinical advice and other requests within two hours of receiving the call.
3. All clinical calls and staff return calls will be recorded in the phone-log and clinical advice provided by staff will be documented in the patient’s medical record.
4. Spot checks will be performed every six months to assess adherence to this policy requirement 80% of the time.

**AC-04, AC-05**

## B. Patient Phone Calls – After Hours

Clinical advice by phone will be available 24 hours a day, 7 days a week from a qualified clinician

1. After hours calls will be responded to by the designated provider on call.
2. In case of emergency patients will be instructed to call **9-1-1** immediately
3. Urgent after-hour calls will be returned within 30 minutes.
4. Non-urgent clinical calls that are time sensitive will be returned within one hour
5. All other calls will be returned during the next working day
6. All clinical calls and staff return calls will be recorded in the EHR and clinical advice provided by staff after hours will be documented in the patient’s medical record as it is dispensed.
7. In the rare circumstance where provider on call does not have access to the EHR temporarily, provider will make notes of nature and disposition of call and reconcile with the EHR as soon as possible and no later than the next business day.
8. Spot checks will be performed every six months to assess adherence to this policy requirement 80% of the time.

**AC-08, AC-05**

## C. Electronic Communications

Secure e-mail consultations with the physician or other clinician are provided through the Patient Portal and will be addressed as follows.

1. Appropriate staff will respond to secure e-mails within 4 hours for clinical messages received during office hours and two days for non-clinical messages.
2. After hours e-mail messages will be responded to by the designated provider on call within two hours for clinical messages received before 8:00 pm and considered urgent by the on-call provider. All other clinical e-mail messages will be responded to within the first 4 hours of the next business day.
3. All clinical advice provided through secure e-mail will be documented in the patient’s medical record in real time by definition.
4. If provider on call needs to respond to an electronic message via telephone, process outlined in Section C, subparagraphs 6 and 7.
5. EHR reports reviewed monthly will document that this policy is followed 80% of the time.

**AC-12**

## D. Availability of Medical Records

1. The practice is using <enter EMR name> which is available to all clinical staff during office hours, and after hours through a secure Internet connection.
   1. Office Hours – Clinical staff will document clinical advice provided to patients and caregivers by phone directly in the medical record as it occurs
   2. After Hours – On call providers will access the patient medical records in the EHR and document clinical advice given to patients and caregivers on the phone. On call providers may request that a secure laptop or other suitable mobile device is provided to them by the practice if necessary.
   3. Electronic communications – Clinical advice provided to patients by secure electronic means is automatically incorporated into the EHR medical record and available through the EHR to all providers during and after office hours.
2. The practice is using <enter name> Patient Portal which is available to all patients, who choose to use it, through the Internet at all times. Practice staff will actively encourage patients to enroll in the Patient Portal and remind patients and caregivers to utilize the Portal at each scheduled visit.
   1. The Patient Portal will contain the following clinical information:
      1. Clinical Summaries – A summary of the patient’s clinical information including, but not limited to, medication list, problem list, medical, social and family histories, care plan and test results.
      2. Appointment list – List of appointments with ability to request an appointment
      3. Diagnostic Results – Latest copies of resulted tests and clinical evaluation notes
      4. Medication list – List of active medications with ability to request renewals
      5. Immunizations – List of current immunizations status
      6. Education – Patient education materials pertinent to health status of the patient
      7. Outstanding balance with ability to pay online
   2. Patients and caregivers provided with access to the Portal by the patient can view, download or transmit clinical summaries or other portions of the medical record at all times, to facilitate self-management and care coordination with other providers of care.
3. Patients who choose not to enroll in the Patient Portal will be provided printed copies of their Clinical Summaries during check-out following each encounter, and will be advised to safely store and refer to clinical summaries during routine self-management at home, and/or use the summaries when accessing care from other providers.

**Approved By:**

**Effective:** 4/15/2017

**Revised:**