



Cooper Green Mercy
HEALTH SERVICES

Healthcare Provider Manual



Cooper Green *Mercy* Health Services Healthcare Provider Manual

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Cooper Green *Mercy* Health Services Provider Manual

Introduction

This manual provides you with information about Cooper Green *Mercy* Health Services and describes how we will work together as we care for our patients' health care needs.

If you have questions concerning your practice here, contact any of the following staff.

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The information contained in this manual is subject to change. The most current manual can be found on our website at www.coopergreen.org. This document is informational and does not constitute a contractual agreement.

Statement from the Medical Director



Cooper Green *Mercy* Health Services boasts a decades-long rich tradition of providing comprehensive, high quality care, as well as serving as a hub of community engagement, clinical education and clinical research. In light of that proud tradition, we aim to continue to be a focal point in the community, to address the needs of Jefferson County residents across the continuum of care from prevention and screening to diagnosis and treatment to health maintenance and survivorship. Our mission is to provide access to care to the neediest citizens, often identified by limited financial means and the absence of insurance coverage. Though many of our efforts are aimed at addressing the unique needs of the poor and the uninsured, we believe our fundamental patient-centered approach to care will benefit all our patients across all economic strata, regardless of insurance status.

At Cooper Green *Mercy* Health Services, we strive to foster an environment where patients are able to access different forms of care under one roof with minimal barriers to that care. We believe that our patients' voices and experiences should be one of the chief sources of information guiding our efforts. Furthermore, our approach to care rests on a premise that patients must take an active role in their healthcare including becoming knowledgeable about their health and engaging in self-management. Our role, as providers, is not only to diagnose disease and prescribe therapies but also to arm patients with the necessary information and skills so that they can actively manage their diseases as well as optimize



their wellness. Though our focus is on health care, we recognize the inextricable link between individuals' health and their overall quality of life, familial relationships, societal productivity, and personal finances. With that in mind we aim to optimize the health of all of our patients as a means of providing far-reaching benefits to the entire population of Jefferson County.

Our Commitment to Human and Civil Rights

Cooper Green *Mercy* Health Services (CGMHS) is committed to ensuring that no individual shall, on the grounds of race, sex, color, creed, national origin, religion, age, sexual orientation, gender identity or expression, or disability, be excluded from participation in, be denied the benefits of, or be otherwise subjected to discrimination under any programs or services offered by or in partnership with CGMHS.

All persons shall be accorded the rights and responsibilities of a spouse, whether through marriage or domestic partnership, as mutually agreed upon by the individuals, regardless of gender.

CGMHS shall comply with all federal and state discrimination and civil rights statutes applicable to it as a healthcare organization and as an employer. CGMHS will uphold its commitment that, in the spirit of the laws, all individuals will be treated with the respect and dignity they deserve.

Patients, patients' families, visitors, employees, and medical staff have the right to be treated with dignity and respect and without fear. Harassment of or harassment by patients, patients' families, visitors, employees, or medical staff is strictly prohibited. All reports of harassment, sexual or non-sexual in nature, shall be taken seriously, shall be investigated, and appropriate action shall be taken to remedy the harassment, if cause is found. All incidences of harassment are immediately to be referred to Administration.

Except as otherwise required by federal or state healthcare statute, no patient, visitor, employee or member of the medical staff shall be excluded from participating in, be denied the benefit of, or be subjected to discrimination under any program or activity of CGMHS solely because of their disability status, including those who are diagnosed as HIV positive.

A request by a person with a disability for assistance in any program or service offered by CGMHS shall be accommodated to the extent practicable. Requests for assistance by patients, patients' family members, or visitors that cannot be readily accommodated should immediately be advanced to the Corporate Compliance Officer, to the Medical Director, or to the Clinical Nursing Director. Requests for accommodation by CGMHS employees or medical staff should be advanced to Human Resources.

Patients, visitors, employees, and members of the medical staff are urged to report any physical barriers, policies or procedures or any other possible impediments that could limit the functionality of persons with disabilities at Cooper Green *Mercy* Health Services. These are to be reported to the Corporate Compliance Officer, to Human Resources, or to the Director as soon as they are identified.

Corporate Governance



Cooper Green *Mercy* Health Services is a department of Jefferson County government and functions under the auspices of the County Manager's Office. As such, we are subject to all Administrative Orders, policies and procedures set forth by the Jefferson County Commission. Jefferson County, in turn, is a jurisdiction subject to the civil service provisions of Act 248 of the 1945 Alabama legislature. This Act is also referred to as the *Enabling Act of the Personnel Board of Jefferson County*.

The Act established the Personnel Board of Jefferson County (PBJC) as the entity responsible for the Act's enforcement. Administrative guidance is provided through the *Rules and Regulations of the Personnel Board of Jefferson County*. Both the *Enabling Act* and the *Rules and Regulations* can be accessed from the Personnel Board's homepage located at www.pbjcal.org.

Websites

Jefferson County Public Site	http://jeffconline.jccal.org
Jefferson County Employee Intranet	http://courthouse.jcc.jccal.org
Personnel Board of Jefferson County	http://pbjcal.org
Cooper Green <i>Mercy</i> Website	http://coopergreen.org
Facebook	http://facebook.com/CooperGreenMercy/
Twitter	https://twitter.com/CooperGreenMHS

Welcome

On behalf of the entire staff, welcome to Cooper Green *Mercy* Health Services. We are proud of the contributions that Cooper Green *Mercy* has made to our community and continues to make to the health and well-being of the residents of Jefferson County. We are excited to have you as part of our team of healthcare providers and look forward to working with you.

Cooper Green *Mercy* Health Services fulfills a critical role in our community by serving as the center of a safety net that facilitates a continuum of care to the County's uninsured and under-insured. We are unique in our focus on and dedication to this population.

We are a multi-specialty ambulatory clinic and through our partnership with the University of Alabama at Birmingham (UAB), we provide comprehensive healthcare services to our patients. Services provided onsite include:

- Primary care
- Specialty care
- Behavioral Health



- Urgent care
- Physical Therapy, Occupational Therapy, Respiratory Therapy, and Speech Therapy
- Radiologic Imaging (CT, Dexascan, Mammography Ultrasound, X-Ray, Fluoroscopy)
- Clinical Laboratory
- Pharmacy

When our patients are in need of advanced specialty care or procedures, not provided onsite, or are in need of inpatient services, they are referred to UAB, St. Vincent's Health System, or Princeton Baptist Medical Center. When external referral to one of our partners is necessary, our Patient Control Center facilitates this referral process for our patients and authorizes and tracks procedures for purposes of paying the partner for the services they provide.

The process for referring patients to one of our external partners for services not provided onsite is outlined in the section on Specialty Clinics in this manual.

Patient Enrollment Eligibility

Patients who receive care at Cooper Green *Mercy* must be:

- Residents of the State of Alabama for one (1) year
- Residents of Jefferson County for thirty (30) days
- At least eighteen (18) years of age

Eligibility criteria are assessed by personnel in the Enrollment Center (1st floor, East Wing) and those persons meeting the requirements are enrolled. All enrolled patients are issued a Health First card, commonly referred to as a "blue" card. This card contains the patient's name, medical record number, card expiration date, and the patient's financial code. Renewable cards are issued for three-year periods, but validation of continued eligibility may occur more frequently.

Importantly, Cooper Green *Mercy* provides care to any residents of Jefferson County who wish to receive their services here. Insured patients provide an important revenue stream that allows us to provide more services to the indigent poor. Consequently, we accept Medicare, Medicaid, and most 3rd party commercial payers. We also accept self-pay patients.

Patients who qualify as indigent:

- Have family incomes of 200% or less of the federal poverty level (FPL) **and**
- Are uninsured

Indigent patients are assigned a sliding-scale co-pay based on their family income when they enroll. Over 60 percent of enrolled patients fall into the indigent category.



Our Vision, Mission, and Values

Our mission, vision, and values are not just words on a page. They define who we are, guide our internal operations, and inform how we interact with our patients, the public, and the community.

Our Vision

Cooper Green *Mercy* Health Services will be a leader of an equitable and just healthcare system through excellence, quality, compassion, and trust.

We believe in full access to healthcare by all people, regardless of their life circumstances. We believe that healthcare is a right, not a privilege of only those who can afford it. We believe that the poorest citizen of Jefferson County should receive the same quality of healthcare as the richest.

Our Mission

Our mission is our core function. It informs our strategy as a healthcare organization and directs our decision making with regard to the services and programs we offer.

- Cooper Green *Mercy* Health Services is dedicated to serving Jefferson County residents with quality healthcare regardless of ability to pay.
- We are committed to the advancement of healthcare through education of our patients and their families, our staff, and the communities we serve and to the pursuit of knowledge through educational and research activities that advance the field of medicine.
- We continuously seek to improve our services and to adapt to meet the changing health needs of the people we serve.

Our Values

Our values are the guiding principles that dictate our behavior and actions, both individually and as an organization. They help shape our corporate culture and reflect what we believe.

Respect The cornerstone of our values is respect for the individual, regardless of personal, ethnic, religious, cultural, socioeconomic background, circumstances or differences.

Excellence in Patient Care We are committed to providing the highest quality healthcare to our patients, to adhering to the highest ethical standards in service delivery, and to promoting an environment of continuous learning.

Compassion We strive to be always mindful of the needs of our patients and of their families and friends and to respond to them in caring and understanding ways and in ways that convey our caring concern.

Teamwork We value the contributions, knowledge, and abilities of all our employees. We respect our employees' opinions and perspectives and we are committed to fostering a culture of employee participation, collaboration and cooperation.

Dedication and Commitment It is our employees' strong commitment and dedication to the County's most vulnerable citizens that sets us apart as a healthcare organization and serves as the foundation of our mission and vision.

Stewardship As providers of healthcare, we are committed to using our resources wisely and to parlaying them into a synergistic healthcare continuum that offers the most effective and efficient use of all of our resources as an institution, healthcare community, and population.

A Brief History of Indigent Care in Jefferson County

Concern for indigent healthcare in the county dates to the late 1800's when a group of Protestant, Catholic, and Jewish women, wives of prominent Birmingham businessmen, created the Hospital of United Charity. The Hospital, renamed Hillman Hospital in 1896, was run by this "Board of Lady Managers" for the next nineteen years and provided care for indigent patients, regardless of race or gender.

In 1907, the facility was sold to Jefferson County.

In 1944, the county gave the Hospital to its new medical college that would later become one of the nation's leading academic health centers, the University of Alabama at Birmingham (UAB); however, the County continued to provide UAB funding for care provided at Hillman Hospital. The Hillman building still stands today at the corner of 6th Avenue South and 20th Street.



Hillman Hospital

Hillman Hospital operated as the County's safety-net facility until a combination of factors finally led the State of Alabama to address the need for a new facility. In an effort to address growing concerns over healthcare inequality, a shortage of beds in the county, and the growing cost of healthcare for the poor, in 1965, the State legislature passed *Act 387, Section 125* of the Code of Alabama. This *Act* mandates a tax of one half of one percent of all retail and liquor sales in the county to be used for indigent healthcare (The Indigent Healthcare Fund). This fund continues to provide some \$50M annually for the operation of Cooper Green *Mercy* Health Services.

The Indigent Care Fund paved the way for building a new 319-bed indigent care hospital which opened its doors in October, 1972, as *Mercy* Hospital. The Hospital was renamed in 1975 as Cooper Green *Mercy* Hospital in honor of the retiring President of the Jefferson County Commission and operated as a full-service acute care facility for the next four decades.



Cooper Green Mercy Hospital

New Beginnings

On November 9, 2011, Jefferson County, Alabama filed a voluntary petition for relief under Chapter 9 of the United States Bankruptcy Code. The \$4.23B bankruptcy was the largest by a U.S. city or county until it was overtaken in July, 2013 by Detroit's \$18 billion case. In a cost-cutting measure and after weeks of contentious debate, the county, which maintained that it had been subsidizing the operations of Cooper Green Mercy Hospital for years, voted on August 28, 2012, to close its inpatient beds.

On December 31, 2012, just after midnight, Cooper Green Mercy Hospital ceased operating as an inpatient facility and reopened as Cooper Green Mercy Health Services. After more than forty years of providing care to the County's poorest and most vulnerable citizens, Cooper Green Mercy remains a symbol of a long and hard-fought battle for healthcare equality and racial dignity in Jefferson County, Alabama. As Shakespeare wrote in *The Tempest*, "what's past is prologue." Our history has only been an introduction to our future, a future of which you are now an integral part.

Significant Dates

1888 – Hospital of United Charity founded

1896 – Hospital renamed Hillman Hospital in honor of local benefactor Thomas Hillman, president of the Tennessee Coal, Iron, and Railroad Company, whose donation of stock and funds, amounting to approximately \$20,000 (nearly \$600,000 in today's dollars), kept the hospital open during the early years.

1907 – Hillman Hospital sold to Jefferson County.

1944 – Hillman Hospital given to the Medical College of Alabama which would become the University of Alabama at Birmingham.

1965 – The Indigent Care Fund was established by the State of Alabama legislature.

1972 – Mercy Hospital was opened as a 319-bed acute care facility.

1975 – Facility was renamed Cooper Green Mercy Hospital

2011 – Jefferson County files what was then the largest municipal bankruptcy in U.S. history.

2012 – On December 31st, the hospital ceased operating as an inpatient facility.

2013 – On January 1st, the facility opened its doors as a multi-specialty ambulatory clinic under the name Cooper Green Mercy Health Services.



Commitment to Non-Discrimination

EEO Commitment

Cooper Green *Mercy* Health Services is an Equal Opportunity Employer. As such, CGMHS forbids discrimination on the basis of race, sex, creed, color, national origin, age, religion, sexual orientation, gender identity or expression, veteran status, or disability in all terms and conditions of employment including, but not limited to, hiring, promotion, demotion, transfer, assignment, training, compensation, lay-off and termination.

It is further the policy of CGMHS not to request, require, or use genetic information, including family medical history, in recruitment or selection or decisions affecting any term or condition of employment.

Requests for Reasonable Accommodation

Cooper Green *Mercy* Health Services is committed to assuring equal access to services, programs, and activities for people with disabilities, to the extent practicable. Patients or visitors with disabilities needing assistance accessing the facility or accessing services are invited to contact the Clinical Nursing Director or the Corporate Compliance Officer.

In addition, Cooper Green *Mercy* Health Services will provide reasonable accommodation to disabled employees to assist them in performing the essential functions of their jobs. Any CGMHS employee who has or experiences a disabling condition that affects his or her ability to perform his or her job and is in need of a workplace accommodation is invited to contact Human Resources.

Workplace Harassment

Everyone deserves the right to work with dignity and respect and without fear. Harassment toward or by providers, co-workers, supervisors, contract employees, students, patients, business associates, or visitors is prohibited.

Sexual

Sexual harassment is defined as unwelcome behavior of a sexual nature that affects terms and conditions of employment. Sexual harassment includes: (1) sexual advances and other verbal or physical conduct where submission to the advances or conduct is made a term or condition of employment or is used as the basis for employment decisions, and (2) unwelcome verbal or physical conduct of a sexual nature that interferes with an employee's work or creates a hostile, intimidating, or offensive work environment.

- Some examples of sexual harassment include, but are not limited to: Unwelcome or unwanted flirtations, propositions, or advances. This includes patting, pinching, brushing up against, hugging, cornering, kissing, fondling, putting one's arm around another, or any other similar physical contact considered unacceptable by another individual.



- Requests or demands for sexual favors. This includes subtle or blatant expectations, pressures, or requests for any type of sexual favor accompanied by an implied or stated promise of preferential treatment or negative consequences concerning one's employment.
- Verbal abuse or kidding that is sex-oriented and considered unacceptable by another individual. This includes comments about an individual's body or appearance (where such comments go beyond an isolated innocuous compliment); off-color jokes or inappropriate use of sexually explicit or offensive language; or any other tasteless, sex-oriented comments, innuendos, or offensive actions, including leering, whistling, or gesturing.
- Participating in fostering a work environment that is generally intimidating, hostile, or offensive because of unwelcome or unwanted sexually-oriented conversation, office décor, suggestions, requests, demands, physical contacts or attention.

Non-Sexual

Non-sexual harassment is defined as verbal or physical conduct that denigrates or shows hostility or aversion toward an individual because of such protected statuses or characteristics as his/her race, color, religion, gender, nation origin, age, marital status, sexual orientation, and any physical or mental quality, characteristic, condition, or impairment, or that of his/her relatives, friends, or associates, that (1) has the purpose or effect of creating an intimidating, hostile, or offensive work environment, (2) has the purpose or effect of unreasonably interfering with an individual's work performance, or (3) otherwise adversely affects an individual's employment opportunities.

Some examples of such harassment are using epithets, slurs, negative stereotypes, threatening, intimidating, or engaging in hostile acts that relate to protected statuses or characteristics such as those referenced above – including purported jokes or pranks; placing on walls, bulletin boards or elsewhere on the work premises, in public places or in social media, or otherwise circulating in the workplace, by any means, written or graphic material that denigrates or shows hostility or aversion toward a person or group because of a protected characteristic.

Complaint Procedure

An individual who experiences harassment is encouraged to make it clear that such behavior is offensive and to bring the matter to the attention of an appropriate CGMHS official. If an allegation of harassment is brought to you or you witness such harassment, you should immediately bring it to the attention of Human Resources, the CGMHS Director, or to the Corporate Compliance Officer. Failure to respond appropriately to allegations of known or suspected incidences of harassment can be a violation of law and can result in termination of employment or contract.



Corporate Compliance

Statement of Corporate Commitment

Cooper Green *Mercy* Health Services is committed to providing healthcare in an environment that minimizes risk to patients, providers, visitors, volunteers, and employees and that complies with all applicable regulatory and statutory requirements. This goal is supported through a formal, organization-wide Corporate Compliance and Environmental Safety Program.

Cooper Green *Mercy's* Corporate Compliance and Environmental Safety Program is designed to assure that employees, providers, and contract workers are knowledgeable of organizational policies and procedures, federal and state statutes, and standards set forth by applicable accrediting and regulatory bodies.

Program Goals

- Encourage an organizational culture of legal compliance and ethical business practices
- Assure that staff at all levels in the organization are knowledgeable regarding ethical standards of conduct and current federal, state, and local regulations affecting healthcare facilities
- Reinforce our commitment to being a values-based organization
- Provide a safe environment for patients, visitors, and staff
- Assist in continually improving the timely, accurate, coordinated, and safe delivery of healthcare services to patients
- Promote an environment of continuous learning

The Program encompasses three areas - Corporate Integrity, Environment of Care, and Infection Control.

The *Corporate Compliance and Environmental Safety Program Manual* can be found on the CGMHS website at www.coopergreen.org.

Access and Use of Protected Health Information

CGMHS employees and providers are required to utilize all reasonable means of safeguarding our patients' health-related information, in whatever form it exists, whether electronic (E-PHI), written, or obtained through observation, verbally, or by any other means. The downloading of PHI onto any external media devices, e.g., disks, CD's, flash drives, etc. without prior approval is prohibited, as is the transmission of PHI *via* unsecured email.

PHI is defined in the discussion of HIPAA below.

All CGMHS employees and providers are expected to be knowledgeable of HIPAA regulations governing PHI and of CGMHS computer security protocols designed to safeguard PHI. The unauthorized access to or the unauthorized use or disclosure of PHI is a serious violation of CGMHS policy and may result in disciplinary action, up to and including termination of employment or contract.



Anti-Kickback Regulations

There are several federal anti-kickback laws that govern the healthcare environment. The federal Anti-Kickback Statute is a criminal statute that prohibits the exchange or the offer to exchange anything of value in an effort to induce or reward the referral of federal health care program business. The Stark Law prohibits a doctor from referring Medicare and Medicaid patients to an entity with which he or she has financial interest, be it ownership, investment, or a structured compensation arrangement. The False Claims Act prohibits individuals and organizations from submitting claims to Medicare or Medicaid for services not rendered or for any such scheme involving claims with the intent to defraud the government.

Violating these laws can incur criminal penalties, civil fines, exclusion from federal health-care programs and loss of medical license.

For more information on federal kickback regulations and on what constitutes a violation, see the *Corporate Compliance and Environmental Safety Program Manual*.

Confidentiality

Protection of privacy and confidentiality are essential to building trust relationships in the community. Breach of confidentiality not only undermines this trust relationship, it can also result in costly lawsuits for the organization. All information related to patients, whether gained verbally, visually, or through access to medical records, must be considered strictly confidential and for use only by authorized individuals. Providers are expected to be familiar and comply with all laws, rules, regulations, and CGMHS policies and procedures related to the use and disclosure of health-related information.

Conflicts of Interest

Cooper Green *Mercy* Health Services considers a conflict of interest to exist when a provider has a personal financial relationship with a commercial company, such as a drug company or medical vendor or supplier, and that provider's financial interest or relationship could specifically influence his or her clinical decision-making or affect a patient's decision or consent to the use of that commercial company's product. Providers should conduct their affairs so as to avoid or minimize conflicts of interest and must respond appropriately when conflicts of interest arise.

Disbarment

Each year, CGMHS providers and employees are certified that they have not been excluded, disbarred, suspended, sanctioned or otherwise have become ineligible to participate in any federal, state, local, or private healthcare program, including but not limited to, Medicare and Medicaid. Employees and providers who have been disbarred are precluded by the Centers for Medicare and Medicaid Services (CMS) from working in a healthcare facility that accepts Medicare and Medicaid payments.



Ethical Behavior

Trust is a critical component of healthcare effectiveness. In order to maintain our patients' trust and the trust of the public whose tax dollars support our mission, it is essential that CGMHS providers strive toward the highest ethical standards achievable. This is true with respect to our business dealings, our financial stewardship, our interactions with the community and certainly when it comes to providing medical care to our patients. To this end, we are committed to complying with laws and regulations governing the delivery of health services, billing for services, and laws of our community. We support patient rights including access to care, informed consent, and privacy and confidentiality as outlined in the American Medical Association's Principles of Medical Ethics (below).

Principles of Medical Ethics (American Medical Association)

- A physician shall be dedicated to providing competent medical care, with compassion and respect for human dignity and rights.
- A physician shall uphold the standards of professionalism, be honest in all professional interactions, and strive to report physicians deficient in character or competence, or engaging in fraud or deception, to appropriate entities.
- A physician shall respect the law and also recognize a responsibility to seek changes in those requirements which are contrary to the best interests of the patient.
- A physician shall respect the rights of patients, colleagues, and other health professionals, and shall safeguard patient confidences and privacy within the constraints of the law.
- A physician shall continue to study, apply, and advance scientific knowledge, maintain a commitment to medical education, make relevant information available to patients, colleagues, and the public, obtain consultation, and use the talents of other health professionals when indicated.
- A physician shall, in the provision of appropriate patient care, except in emergencies, be free to choose whom to serve, with whom to associate, and the environment in which to provide medical care.
- A physician shall recognize a responsibility to participate in activities contributing to the improvement of the community and the betterment of public health.
- A physician shall, while caring for a patient, regard responsibility to the patient as paramount.
- A physician shall support access to medical care for all people.

Gifts and Gratuities

No provider representing Cooper Green *Mercy* Health Services may solicit gifts from patients, visitors, vendors, or suppliers. Additionally, no provider representing Cooper Green *Mercy* Health Services may accept gifts from patients, visitors, vendors, or suppliers, unless such gifts are of nominal or little intrinsic

value. This prohibition includes, but is not limited to, the acceptance of gifts, money, meals, tickets, or other items of value from drug manufacturers and wholesalers and medical vendors and suppliers.

Free Drug Samples

In general, CGMHS will try to minimize the number of free samples due to the financial constraints of continuing often higher-priced medications long-term if lower-cost alternatives are available. Furthermore, the acceptance of free samples will also be limited due to the need for federal tracking and reporting requirements. Therefore, providers at Cooper Green Mercy Health Services may not accept free drug samples from pharmaceutical representatives without prior approval from the CGMHS Pharmaceutical and Therapeutics (P&T) Committee. Individual requests will each be reviewed by the P&T Committee to determine if there is a compelling justification for the receipt of the desired free samples that might uniquely fulfill a significant clinical need not otherwise met by an alternative already available to the CGMHS population.

Health Insurance Portability and Accountability Act (HIPAA)



The *Standards for Privacy of Individually Identifiable Health Information* (“Privacy Rule”) establishes a set a national standards for the protection of certain health information. The U.S. Department of Health and Human Services (“HHS”) issued the Privacy Rule to implement the requirement of HIPAA.

The Privacy Rule standards:

- Address the use and disclosure of individuals’ health information—called “protected health information” by organizations subject to the Privacy Rule—called “covered entities.”
- Are designed to better allow patients to understand and control how their health information is used.

A major goal of the Privacy Rule is to assure that individuals’ health information is properly protected while allowing the flow of health information needed to provide and promote high quality health care and to protect the public’s health and wellbeing.

Covered Entity Defined

The Privacy Rule covers a health care provider whether the provider electronically transmits these transactions directly or uses a billing service or other third party to do so on its behalf. Health care providers include all “providers of services”, such as institutional providers (e.g. hospitals) and providers such as physicians, dentists and other practitioners as defined by Medicare, and any other person or organization that furnishes, bills, or is paid for health care.



Cooper Green *Mercy* Health Services is a “provider” as defined in the law and subject to the rules and regulations set forth therein.

Protected Health Information (PHI) Defined

The Privacy Rule protects all “*individually identifiable health information*” held or transmitted by a covered entity or its business associate, in any form or media, whether electronic, paper, or oral. The Privacy Rule calls this information “protected health information (PHI).”

“Individually identifiable health information” is information, including demographic data, that relates to:

- The individual’s past, present or future physical or mental health or condition,
- The provision of health care to the individual, or
- The past, present, or future payment for the provision of health care to the individual, and that identifies the individual or for which there is a reasonable basis to believe it can be used to identify the individual.

Access and Uses of Data

Cooper Green *Mercy* Health Services has policies and procedures in place that restrict access and uses of protected health information based on an individual’s role in the organization. The specific information an employee or provider needs to perform his or her job duties determines what access rights he or she is granted.

- Access to medical records and patient billing information, whether in paper form or electronic, is password and/or access restricted.
- Sharing passwords with or giving access to systems that house protected health information to someone not so authorized is prohibited and may result in disciplinary action up to and including termination of employment or contractual relationship.
- Accessing protected health information for purposes not authorized is prohibited and may result in disciplinary action up to and including termination of employment or contractual relationship.

Disclosures and Requests for Disclosures

PHI can only be released for authorized purposes and only to individuals or entities that have an established “need and right” to know the information. When PHI is requested, only the **minimum amount** reasonably necessary to achieve the purpose of the disclosure is released. Requests for PHI are directed to the CGMHS Office of Health Information Management (Medical Records). This department is responsible for validating, documenting, and responding to all such requests for PHI.

Patients requesting information from their medical record should be directed to the Office of Health Information Management.



Informed Consent

Patients have a fundamental right to share in their treatment plans. To do so a patient must be given complete case information, in the correct form for the patient to completely comprehend, concerning diagnosis, treatment, prognosis, alternative treatments, and possible complications that could arise.

Providers have a duty to disclose information to their patients so that their patients can make reasonable decisions regarding treatment and treatment alternatives. Informed consent is achieved when there is “a clear appreciation and understanding of the facts, implications, and consequences of an action.”

All health care procedures require some consent by the patient. CGMHS’ patients sign a general *Consent for Treatment, Payment, and Healthcare Operations* form when they enroll as a patient. Among other attestations, the patient agrees to the following:

“I voluntarily consent to the usual and customary examinations, tests, and procedures as ordered by my physician and the medical staff associates, medical students and students of other healthcare professionals involved in my treatment and care.”

However, this does not substitute for a healthcare provider’s obligation to ensure his or her patients’ understanding of treatments and risks associated with their care. Invasive procedures performed at CGMHS require additional consent.

In Alabama, if injury to the patient or research subject results from a procedure, particularly an invasive procedure, failing to get informed consent may be considered negligence and expose the healthcare provider to a medical malpractice claim. Even if such claim is unsuccessful, failure to obtain informed consent raises serious trust issues with patients and the community.

Reporting and Feedback

Feedback from our providers, employees and from the public is crucial to improving our services and operations and for assuring the best healthcare experience possible for our patients. Patients can call our 24-hour Patient Hotline to provide their feedback. Employees and providers can call our 24-hour Corporate Compliance Line to report any violations of our Code of Ethics. Reports can be anonymous. All concerns expressed are investigated. Retaliation against individuals who, in good faith, report suspected wrongdoing is prohibited.

Patient Hotline – 930-3636
Corporate Compliance Reporting Line – 930-3444



Time and Attendance

Administrative Time

Full-time providers are allotted four (4) hours per week of administrative time. This time is to allow providers to complete and sign charts, to return calls to patients, sign forms, complete prescriptions, enter consults, and to perform other administrative duties, as necessary.

Clinic Days and Hours

Normal operating hours for the clinic are 8:00 AM until 5:00 PM, Monday through Friday.

The Urgent Care Clinic is open from 7:00 AM until 7:00 PM, Monday through Friday and from 9:00 AM until 5:00 PM on Saturdays and Sundays.

The Laboratory and Radiology remain open until 7:00 PM on weekdays and are on duty on weekends to support Urgent Care.

Recording Time Worked

Providers complete time sheets that are turned into the Clinical Nursing Director on the first of each month. These time sheets are required for the County to issue pay.

Requesting Time Off

Except in cases of illness or unforeseen circumstances, providers wishing to take time off are requested to give at least thirty (30) days' advance notice, so that patients can be moved to new appointment times, if necessary.

Requests for time off should be made to the Clinical Nursing Director or to the Medical Director, who will then coordinate with Appointment Scheduling.

Medication Refill Coverage during Provider Absence

It is the provider's responsibility to assure coverage for medication refill requests during a scheduled absence.

Reporting an Unexpected Absence

In the event of unexpected illness or an emergency that would prevent you from seeing patients, you should immediately contact the Clinical Nursing Director at **276-6278** who will then coordinate with Appointment Scheduling. If you are unable to contact the Clinical Nursing Director, contact the Charge Nurse On-Call at **266-6880**. Appointment Scheduling will contact your patients in an attempt to reschedule. Otherwise, every attempt will be made to have your patients seen by other providers in order to minimize the inconvenience to the patients.



Health and Safety

CGMHS takes workplace health and safety very seriously. To the extent possible, it is the intent of CGMHS to provide a safe and healthy working environment for our employees, providers, patients, and visitors.

Alabama Infected Healthcare Worker Management Act

The Alabama Infected Healthcare Worker Management Act mandates that any health care worker infected with the human immunodeficiency virus (HIV) or hepatitis B virus (HBV) who performs an invasive procedure or any physician providing care to an infected health care worker shall notify the State Health Officer, or his designee, of the infection.

Invasive procedures include those medical or surgical procedures characterized by the digital palpation of a needle tip in a body cavity or by the simultaneous presence of the health care worker's finger and a needle or other sharp instrument or object in a poorly visualized or highly confined anatomic site.

Procedures not covered include physical examinations; blood pressure checks; eye examination; phlebotomy; administering intramuscular, intradermal, or subcutaneous injections; needle aspirations; lumbar punctures; angiographic procedures; vaginal, oral, or rectal exams; endoscopic or bronchoscopy procedures; or lines, nasogastric tubes, endotracheal tubes, rectal tubes, and urinary catheters.

Emergency Codes

Adopting code uniformity enables employees to respond appropriately to specific emergencies, enhancing their own safety, as well as the safety of patients and visitors. CGMHS utilizes the following list of codes during emergency situations: Code White, Code Orange, Code Brown, Code Blue, Code Black, Code Red, and Code Green.

To declare a Code, dial the CGMHS Operator at ext. **9026** or **930-3220** and provide the Code type and specific location. When a Code is called, trained teams of professionals respond according to the Code type.

Code White (Needs Medical Assistance)

A Code White is called to provide medical triage in the event of a non-life threatening medical incident. A trained team of employees responds immediately when a Code White is called.

Code Blue (Respiratory and/or Cardiac Arrest)

Code Blue is called in the event of a suspected or imminent cardiopulmonary arrest, respiratory failure, or other similar medical emergency involving a patient, employee, or visitor.

CGMHS employees who are certified in Cardiopulmonary Resuscitation (CPR) respond within their respective scopes of practice and utilize guidelines set by the American Heart Association on Advanced Cardiac Life Support. When a Code Blue is called, EMS is immediately notified by the CGMHS Operator. Emergency transport from CGMHS to local emergency facilities is accomplished by calling 911.



Code Red (Fire or Smoke)

Code Red is called to provide an appropriate response in the event of a suspected or actual smoke condition or fire. *See Fire Safety in this manual.*

- Code Red is immediately initiated whenever the following is observed:
 - Seeing smoke, sparks or a fire
 - Smelling smoke or other burning material
 - Feeling unusual heat radiating from a door handle
 - In response to any fire/life safety system alarm

If a Code Red is called, move patients away from the vicinity of the fire, if known. Otherwise, wait for instructions over the speaker system. Do not evacuate unless told to do so. Detailed instructions can be found in the *Corporate Compliance and Environmental Safety Manual*.

Code Brown (Hostage Situation or Unsafe Security Situation)

A Code Brown is called in the event that an individual is being held against his or her will or a threat of harmful action, either verbally or physically has been made. Security is immediately called and dispatched to the area by the CGMHS Operator. A Code Brown is appropriate when you or a staff member are concerned about personal safety or the safety of others. When possible, staff members should not attempt to intervene or negotiate, but wait for a Security Officer to arrive.

Code Orange (Bomb Threat)

Code Orange is called in the event of a bomb or bomb threat or suspicious package. The individual receiving the threat should:

- Take notes of the phone conversation detailing everything the caller states.
- Immediately forward the transcribed notes and additional information to CGMHS' Security Department.

The Security Department will notify CGMHS Administration and a determination made as to whether a Code Orange alert is appropriate. If so, notification will be made by way of the CGMHS speaker system and instructions provided.

Code Black (Severe Weather)

A Code Black is initiated when unsafe weather conditions exist in the area. Employees, providers, and patients will be instructed as to how to respond by way of the CGMHS speaker system depending on the specific threat.

Phase 1 – A tornado watch has been issued. Normal operations continue.

Phase 2 – A tornado warning has been issued. Listen for instructions.

Phase 3 – A tornado alert has been issued. Move yourself and patients away from windows and into an interior corridor.



Code Green (All Clear)

A Code Green is declared to indicate that normal operating procedures may resume and that the conditions that gave rise to the Code are no longer present.

Equipment Safety

Safe Medical Devices Act of 1990

The Safe Medical Devices Act requires health-care professionals to report deaths or injuries related to a particular medical device to the Food and Drug Administration (FDA) or the product's manufacturer. CGMHS medical personnel should immediately report any suspected malfunctioning medical equipment/devices, any recall notifications on medical equipment/devices, or other problems which may be related to the proper and safe operation of any medical equipment/devices to Biomedical Engineering and to the Compliance Officer. Suspect equipment should be clearly tagged until it can be assessed by Biomedical Engineering.

Needle Sticks (Evaluation and Management of Employee Blood/Body Fluid Exposure)

Cooper Green Mercy Health Services has procedures in place to respond immediately to needle sticks and other exposures to blood and body fluids. If you experience an exposure, inform your Charge Nurse (or the Charge Nurse on Call) or the Clinical Nursing Director immediately. You will be directed to the Urgent Care Clinic where the first-response protocol will be implemented, including initial chemoprophylaxis treatment, as clinically indicated. The Charge Nurse or Clinical Nursing Director will be responsible for speaking with, obtaining consent, and having a blood sample drawn from the source patient.

Follow-up care and testing for Cooper Green Mercy employees and physicians will be provided by the County's Department of Occupational Health. Follow-up care and testing for UAB employees and physicians will be provided by UAB Employee Health. Physicians directly contracted by CGMHS and facility tenants have the option to receive follow up care in the CGMHS Urgent Care Clinic.

All exposures should be reported to the CGMHS Office of Human Resources as soon as possible for risk management assessment and to assure that CGMHS employees and physicians follow the County's on-the-job injury protocol.

The complete exposure policy and procedure may be found in the appendix and on the CGMHS Website.

Personal Security

CGMHS attempts to maintain as safe and secure an environment as possible and takes your personal safety and security very seriously. Consequently, CGMHS maintains a security staff twenty-four hours a day. Because we are a public facility, you are advised to secure your personal belongings at all times, to be observant of your surroundings, and to take the same precautions you would in any similar public environment.



In addition, security cameras are strategically placed throughout the facility, alarms placed on all entrance, stairwell, and exit doors, and emergency alarms located at each nurse's station and at other public access locations, such as Enrollment, the Cashier's Office, and in the parking deck. These systems are monitored centrally by the CGMHS Security Department.

If you need to contact our Security Department, they may be reached at **930-3347**. In the event of an unsafe security situation, you may also call the switchboard at ext. **9026** or **930-3220** with a Code Brown alert. See "Emergency Codes" in this manual.

Security breaches and incidents are documented and provided to Administration within 24 hours or the next business day, whichever is sooner.

Smoking

As a healthcare organization, CGMHS is committed to promoting good health habits; consequently, CGMHS is a non-smoking facility. The use of tobacco products and the use of electronic smoking (vaping) products inside any CGMHS facility is strictly prohibited. Employees, patients, and visitors who wish to smoke may do so outside and at least twenty (20) feet from any entrances. (Birmingham City Ordinance 87-75)

Use of Alcohol and Drugs

Being under the influence of drugs or alcohol on the job poses serious safety and health risks to the user and to all those who work with or around the user.

CGMHS is a Drug and Alcohol Free Workplace; consequently, the use, sale, purchase, transfer, or possession of illegal drugs on CGMHS property or the use or possession, or being under the influence of alcohol on CGMHS property is strictly prohibited. As a drug-free workplace, the CGMHS maintains the right to conduct both scheduled and random drug testing of personnel serving in safety-sensitive positions and to conduct drug testing of any employee following an on-the-job accident. Employees who refuse drug testing will be subject to disciplinary action up to and including termination of employment.

Workplace Violence/Firearms

CGMHS has a policy of zero tolerance for violence. Any act of physical or verbal violence, threat of violence, or the display of threatening behavior toward or by a CGMHS employee, provider, patient, guest, or visitor may result in immediate removal from CGMHS property and disciplinary action up to and including termination of employment or contract cancellation.

Likewise, CGMHS prohibits its personnel and providers from bringing firearms onto facility property, except to the extent allowable by Alabama Act 2013-283 and with the exception of law enforcement and security personnel.

Threats and/or acts of violence must be reported to the CGMHS Security Department as soon as possible. All incidences of violence or threats of violence are provided to Administration. If a patient is involved,



Administration will determine, after further investigation, whether that patient may continue to receive care at CGMHS and will notify the patient as indicated by the facts.

General Information

Clinical Trials

As part of our mission, we are committed to the advancement of healthcare through research activities that advance the field of medicine. To this end, Cooper Green *Mercy* Health Services participates with UAB in a number of clinical trials and research initiatives.

Clinical trials at CGMHS are only conducted after they have been thoroughly scrutinized. Any clinical trial offered at Cooper Green *Mercy* Health Services has been approved by the University of Alabama at Birmingham (UAB) Institutional Review Board (IRB) and by the CGMHS Clinical Trial Review Committee.

For a list of clinical trials for which volunteers are currently being recruited or trials that are underway, contact the Cooper Green *Mercy* Health Services Corporate Compliance Officer. These may also be found on the CGMHS website.

Committees

Provider involvement in decision making is a key element in assuring that Cooper Green *Mercy* Health Services is delivering high quality healthcare in a provider-friendly, patient-centric environment. To this end, we have committees that are responsible for reviewing operational and clinical policies and procedures, establishing and tracking operational metrics, and recommending new products and services. Your involvement in these committees is encouraged. Committees include:

Pharmaceutical and Therapeutics (P&T) Committee – Reviews medication-use policies and the CGMHS drug formulary; establishes policies regarding the use of drugs, therapies, and drug-related products and identifies those that are most medically appropriate and cost-effective to best serve the health interests of the CGMHS patient population. Meets quarterly. Chaired by the Pharmacy Manager.

Quality Assurance (QA) Committee - QA is an ongoing, comprehensive program which analyzes essential aspects of the clinic's entire operations and involves determining quality goals, measuring goal achievement, and implementing corrective actions where goals are not reached. This committee also serves as the Corporate Compliance and Environmental Safety Committee. The QA Committee reviews goals and success metrics. Meets quarterly. Chaired by the Laboratory Medical Director.

Guidelines Committee – Responsible for identifying clinical guidelines to be implemented in Primary Care. Meets every other month. Provider chaired.

Community Providers

One of Cooper Green *Mercy's* strategic imperatives is to increase primary care points of access by partnering with community providers who have an interest in delivering healthcare to the indigent population in Jefferson County. CGMHS currently partners with:



Aletheia House (Bessemer)

Cahaba Medical Care (Bessemer)

Church of the Reconciler (Downtown Birmingham)

Firehouse Shelter (Downtown Birmingham)

Jefferson County Department of Health

These organizations provide primary care and/or healthcare screening to patients who qualify as indigent pursuant to CGMHS enrollment criteria. The patients who receive their primary care through these organizations have access to CGMHS specialty clinics, radiology, and rehabilitation services. They do not have access to laboratory services or to the CGMHS Pharmacy, unless the patients are Health First card holders.

Credentialing

Prior to appointment at Cooper Green *Mercy* Health Services, providers must complete credentialing paperwork with the CGMHS Office of Human Resources. Additionally, providers must submit three professional references along with a copy of a current Alabama state medical license, current Alabama controlled substance certification and current DEA license. The state licenses must be provided to Human Resources annually thereafter and the DEA license upon renewal. All providers are subject to a National Databank review, as well as verification of credentials through the Alabama Board of Medical Examiners every two years. You will receive notification when documents are due to the Office of Human Resources, but they must be submitted timely for you to continue practicing in the facility.

As a condition of practicing at Cooper Green *Mercy*, all providers are required to maintain Board certification.

Dental Services

Cooper Green *Mercy* does not offer dental services. However, we do partner with organizations who have agreed to provide dental services to our patients at low or no cost. CGMHS patients must be referred to these clinics by their primary care provider.

Cahaba Valley Health Care is located on the 7th Floor of the CGMHS facility. CVHC sponsors 40 dental clinics a year and performs fillings and extractions free of charge. Dental clinics are on designated Sundays by appointment only. Patients are scheduled by acuity. For services other than fillings and extractions, CVHC assists patients with finding providers who have agreed to perform needed procedures at low-cost.

The Jefferson County Department of Health operates dental clinics at its locations. JCDH has agreed to provide dental services to our patients who present vouchers signed by CGMHS primary care providers. The services provided are more comprehensive than those provided by CVHC. A co-pay is required, but the services are free.



Electronic Medical Record

It is the policy at Cooper Green *Mercy* Health Services to maintain a quality medical record which is carefully documented, complete, accurate, legible, relevant, timely, secure and informative. Providers are expected to verify and sign entries to the medical record within thirty days of a patient visit. Records not signed within thirty days are considered delinquent thereafter. A list of incomplete and delinquent charts will be sent to providers monthly.

CareVue is the current electronic medical record utilized at Cooper Green *Mercy* Health Services. Prior to May 1, 2012, medical records were maintained as paper files with selected portions of the record maintained in an electronic database, Meditech. Information housed in Meditech can be accessed online.

Paper files can be accessed in the Health Information Management Office located on the 3rd Floor, Room 329. Policies governing the access, use, and release of medical records can be found on the CGMHS website.

Because our patients are referred to UAB for advanced specialty care and for inpatient services and to assure a better coordination of care for the patients, CGMHS providers are given online access to information on their patients housed in the UAB Medical Record.

HIPAA gives patients and their authorized representatives the right to access, inspect and obtain a copy of their medical record for as long as the information is maintained. Patients requesting information from their medical records should be directed to the Health Information Management Office.

Forms

Providers are frequently asked to complete forms for patients, such as disability forms, return to work forms, social security and other insurance claim forms. Completion of forms is an important service we provide to our patients; however, we recognize that their completion can be quite time consuming.

If you are asked to complete a form for a patient, other than a simple work excuse that can be completed quickly, instruct the patient to leave the form at the Appointment Scheduling Center located in the front 1st Floor lobby. The forms are logged-in and picked up on Wednesdays by each Charge Nurse. Your Charge Nurse will complete the form to the extent it can be completed prior to giving it to you to sign. Your Charge Nurse will then notify the patient that the form has been completed and is ready to be picked up.

Completed forms are returned to the Appointment Scheduling Center for patient pick-up. There is no charge to the patient.

Please note that we do not complete disability forms that require Functional Capacity Testing (FCT). CGMHS does not have the specialized equipment necessary to perform FCTs. Patients will be provided a list of local facilities that can perform these tests; however, the cost of these tests is not covered by CGMHS.



Language Line

Title VI of the Civil Rights Act of 1964 requires any health or social services organization that receives federal funding to provide language assistance to any patient with limited English proficiency (LEP). The Joint Commission also addresses this issue.

Language assistance assures that:

- The LEP patient is able to communicate relevant information to the provider
- The provider is able to understand the LEP patient
- The LEP patient is able to understand all necessary information. This includes a description of benefits and services available.
- The LEP patient is able to receive eligible services.

CGMHS utilizes a telephone-based language line. Providers or other personnel working with an LEP patient may call **1-800-523-1786** from any facility telephone. Enter the **Facility Code 215037** and the 6-digit alpha/number on the back of your ID badge, as prompted. Calls should be made from locations where other patients are unlikely to overhear the conversation. Although friends and relatives may, at the request of the patient, be privy to the exchange of information, they should not be used as interpreters for the exchange of important medical information with the patient.

Hearing Impaired Patients

You may occasionally be scheduled with a hearing impaired patient who is in need of interpreter services. When an interpreter is needed for a hearing impaired patient, a certified interpreter is provided by the Alabama Institute for the Deaf and Blind (AIDB). This is coordinated, as needed, by the Corporate Compliance Officer. Although friends and relatives may, at the request of the patient, be privy to the exchange of information, friends and relatives should not be used as interpreters for the exchange of important medical information with the patient. Only certified interpreters may be used.

Parking

A parking lot for physicians is located at the rear entrance of the building but feel free to park in any of the three designated parking lots. You will be issued a parking card by CGMHS Human Resources necessary for accessing these lots. Parking for physicians is free of charge.

Separation from Service

Providers separating from service are expected to give notice consistent with their contractual or employment agreements. We request that providers give as much notice as possible of intent to separate, so that patients can be reassigned and rescheduled with minimum inconvenience. Final payment for services rendered is issued following submission of the provider's final invoice and completion of all outstanding charts.

Patient Scheduling

Cancellation of Patients

Because it is often difficult for our patients to find transportation to the clinic or to reschedule due to work commitments, last minute cancellation of patients should occur only in extraordinary circumstances. Cancellation of patients must be coordinated with the Clinical Nursing Director and every attempt should be made to schedule patients with other providers to minimize the inconvenience. Medical Clerks in the clinics are not permitted to cancel patients without the approval of the Clinical Nursing Director or Medical Director.

Late Arriving Patients

Late arriving patients can disrupt patient flow. However, life circumstances, weather, work schedules, and transportation issues sometimes create unavoidable problems for our patients getting to their appointments on time. It is our practice to work late-arriving patients in over the course of the day to the extent practicable or otherwise to provide the patient with the option of being overbooked as soon as possible.

Overbooking

Patient no-show rates tend to run between 20%-25%. Providers may approve overbooked patients as necessary depending on patient volume. Overbooks are scheduled by the Appointment Scheduling Center.

Patient Assignment

The Appointment Scheduling Center assigns new patients to providers based on provider accessibility. Providers are typically assigned 20 to 22 patients per day. New patients count as two for scheduling purposes. Fifteen minutes is allocated for return patients and thirty minutes for new patients. Patients may be scheduled with a provider up to 8:00 AM the day of clinic.

Provider Panels

A typical full-time primary care provider panel is 1800 individual patients.

Requests to Change Primary Care Providers

Request by Patients

We certainly hope that the patient/provider relationship is a satisfactory one for everyone involved; however, we recognize that human interaction is not always predictable. We believe that our patients should have the right to change providers to the extent we can accommodate such a change, if they are not satisfied. Patients requesting a change are asked to complete a change request form outlining their concern prior to being reassigned. Reassignment is not guaranteed.

Request by Provider



A provider equally has the right to request to no longer treat a patient if he or she believes it is not a mutually satisfactory or productive relationship. This should first be discussed with the Clinical Nursing Director who will then advise Administration. Administration will notify the patient of reassignment or of dismissal from the facility, as is appropriate.

In either of the situations above, it is the current provider's responsibility to continue to follow the patient and to continue care until the patient has been reassigned and the new CGMHS provider can assume responsibility for the patient. Particularly where the patient has been prescribed critical maintenance medications or narcotics for chronic pain, a complete drug history should be handed off to the new provider to prevent possible interruption of the patient's medication regime.

Schedule Changes

If circumstances occur that require you to temporarily change your clinic schedule, this should be discussed with the Clinical Nursing Director or the Medical Director as far in advance as possible. If approved, the Clinical Nursing Director will coordinate with the Appointment Scheduling Center.

Walk-In Patients

Unscheduled patients are typically seen in the Urgent Care Clinic, if they cannot be accommodated in a provider's schedule; however, a provider may choose to see an unscheduled patient at his or her discretion. Very occasionally, you may be asked to see a walk-in patient or you may be asked to work the patient of another provider into your schedule, if possible, in the event of the unexpected absence of that provider.

Patient Assistance Office

The Patient Assistance Office, located on the 3rd Floor, serves as a single point of contact for patients needing to refill prescriptions, seeking general medical information, information related to their individual care, or help with other patient-related or physician-related issues. The office assists patients with navigating their healthcare at Cooper Green *Mercy*. It is a patient-centric office responsible for assuring that patient questions, needs, and concerns are addressed promptly and fully; consequently, staff of this office may seek timely assistance or information from you or your Nurse in order to assist an inquiring patient.

Pharmacy

The CGMHS Pharmacy is located on the 1st Floor of the facility. The Pharmacy is open from 8:00 AM until 5:00 PM, Monday through Friday. Requests to fill prescriptions are accepted until 4:30 PM. The Pharmacy is closed on weekends and County holidays. Pursuant to federal law, only actively enrolled CGMHS patients may fill prescriptions in our pharmacy and, with the exception of providers to whom CGMHS patients have been referred, prescriptions written by non-CGMHS providers typically cannot be honored.



Medications, particularly critical maintenance medications, are heavily discounted. Patients are charged based on the financial code assigned to them by the Enrollment Office. The list of critical maintenance medications can be viewed in the appendix and obtained from the Pharmacy.

To the extent possible, CGMHS dispenses generic drugs. Unless noted to the contrary, if a provider writes a higher-priced drug, the pharmacy will fill the prescription with a lower-cost generic, if one is available. For higher-priced, non-generic medications, CGMHS has a Patient Assistance Program that assists patients in securing name brand drugs free of charge directly from the drug manufacturers.

Formulary

The current CGMHS formulary can be viewed at <http://online.lexi.com/>. If you wish to prescribe a medication that is not currently on the CGMHS formulary, you should submit a formulary addition sheet to the Pharmacy Manager. The Pharmacy Manager will add your request to the Pharmacy and Therapeutic (P&T) Committee agenda. This committee meets quarterly.

Lost or Stolen Prescriptions

Lost or stolen prescriptions may be rewritten at the discretion of the provider. As a matter of policy, CGMHS requires an official police report before rewriting a prescription for a narcotic, benzodiazepine or other psychotropic medication and reserves the right to require a police report to refill other lost, stolen, or destroyed medications.

Narcotics/Psychiatric Medication Contracts

Patients prescribed Class 2 or 3 narcotics for chronic pain management and patients prescribed long-term benzodiazepines are required to sign contracts stipulating that they will abide by guidelines set forth in the document(s) and that they have been advised of the benefits and risks of long-term treatment. See appendix.

Chronic pain is ongoing or recurrent pain, lasting beyond the usual course of acute illness or injury or more than 3 to 6 months, and which adversely affects the individual's well-being. Providers managing patients for chronic pain using narcotics or prescribing long-term benzodiazepines should check the PDMP and require a UDS prior to each prescription refill. It is within the provider's discretion and clinical judgment to discontinue treatment of patients who are suspected of violating the agreement(s). Any suspicion of diversion should be reported to CGMHS Security.

Writing Prescriptions

For purposes of coordination of care, all prescriptions are to be entered into the CareVue EHR. While the software MDSOFT is utilized by some providers for writing prescriptions, it is not an approved medical record. To guard against forged prescriptions, it is very important that prescription pads be kept in a secure location where they are not accessible to patients at any time.



Specialty Clinics

Onsite Referrals (Consults)

Cooper Green *Mercy* operates specialty clinics onsite that are open on designated days of the week. Patients must be referred to specialists by their assigned CGMHS primary care provider or through one of CGMHS' community primary care partners.* Patients cannot self-refer. The clinics include:

Anti-Coagulation (Coumadin)	Ophthalmology
Cardiology	Orthopedics
Dermatology	Podiatry
Diabetes	Psychiatry (Behavioral Health)
ENT	Rheumatology
Hematology/Oncology	Surgery
Hepatitis C	Urology
Neurology	Women's Health and Wellness
Nutrition	

*Patients who qualify for services at Cooper Green *Mercy* and have been diagnosed with cancer at another facility may be seen in Hematology/Oncology prior to a primary care visit or referral.

Additionally, referrals are required for patients to be seen in Rehabilitation Services.

Many of the specialty clinics have developed referral guidelines. These guidelines help assure that patients are being referred for purposes appropriate to the clinical practice and that the specialist has the necessary medical information needed at the time of appointment. These guidelines should be consulted prior to referral of patients and may be found in the appendix and on the CGMHS website.

Onsite Referral Process

1. Enter a consult in the appropriate CareVue template.
2. Select the service.
3. The consult will be reviewed by the appropriate specialty clinic.
4. If accepted, the specialty clinic will schedule an appointment with the patient directly.
5. If denied, the consult will be appropriately annotated and returned. In some instances, the specialty clinic may ask for specific lab tests or procedures prior to re-referral.

Offsite Referrals (Consults)

Every attempt should be made to have procedures and tests performed onsite. This is an issue of both cost to Cooper Green *Mercy* and convenience for the patients. Referral offsite is appropriate for necessary procedures or tests not performed at CGMHS. Offsite referral requests may be returned for further justification where tests and procedures can be performed on site or do not meet referral guidelines.

Referrals cannot be made to facilities or providers with whom CGMHS does not have a contractual agreement, unless the services provided are at no cost.



Offsite referrals are accomplished by entering a consult for billing authorization using the appropriate CareVue template. Requests for billing authorization are processed in the Patient Control Center. The Patient Control Center will review the request and, if approved, will forward the consult to the appropriate UAB department along with any requested or required medical record information or documentation. If accepted, the UAB department will schedule the patient directly. CareVue is annotated when the appointment is made. Post-visit results are returned to CGMHS and are scanned into the patient's medical record.

Appendix

[Critical Maintenance Medications List](#)

[Evaluation and Management of Employee Blood/Body Fluid Exposures Policy](#)

[Medication Contracts, Narcotics/Psychiatric](#)

[Referral Guidelines for Specialty Clinics and Ancillary Services](#)

[Zika Virus Submission Guidelines](#)