



What's up Doc? case management news

Discharge Planning...

Hospital discharge planning is a service to assist patients in arranging the care needed following a hospital stay. Case managers/Social Services access and arrange for services including home care, nursing home care, rehabilitative care, out-patient medical treatment and other needs as identified.

Discharge planning services in Medicare certified hospitals must meet the following standards:

- Hospitals must identify and evaluate persons who may need discharge planning assistance.
- The evaluation must be done on a timely basis and must determine

the need for services after the hospital stay and the availability of these services.

- The results of the evaluation must be discussed with the patient or patient's representative
- If requested by the patient's physician, the hospital must help develop and implement a discharge plan for the patient.
- Discharge planning must be provided or supervised by a social worker, or a registered nurse.

Although Medicare pays for a designated number of days of hospital care each benefit period, it will only pay for inpatient care if it is determined to

be medically necessary. Medicare pays hospitals based on a system known as MS-DRG or "Diagnosis Related Groups". A set amount based on the average cost for all patients with a particular diagnosis and severity of illness. If the hospital spends more than the set amount to care for the patient it will lose money because it cannot bill for the extra cost. The system is meant to reward hospitals that **operate cost effectively**. Hospitals can make money on lower cost cases and those of shorter than average duration.

Thus the need for early and efficient discharge planning, while assuring quality patient care along the continuum .

Future Impact

Here at LJCMC discharge planning has been pushed to the forefront by the case management department.

We have implemented a weekly discharge planning meeting with nurse case managers, social services and medical staff. We discuss all cases.

At each meeting we address:

- Diagnosis
- Length of stay
- Medical necessity
- Barriers to discharge
- Next appropriate level of care placement

Discharge planning is inherently complex. Information from many sources must be gathered, including patient specific information regarding functional status, availability of community resources, availability of care givers at home, ethnicity, age, and technology dependence.



PHYSICIAN REMINDERS:

- In summary, in order to provide efficient discharge planning:
- Contact Social Services / Case Management at ext. 1827
- Order Consults as soon as possible
- Remember: Discharge Planning begins on Admit!
- Questions? Contact Debbie Picou, RN 873-1833