

Date July 13, 2016

James Skogsbergh Chairman American Hospital Association 155 N. Wacker Dr. Chicago, Illinois 60606

Dear Mr. Skogsbergh,

On behalf of the American Academy of Family Physicians, which represents 124,900 family physicians and medical students across the country. I write to request assistance in facilitating the timely release of medical records, specifically discharge summaries and instructions, from hospitals to primary care physicians to promote transitional care management (TCM).

In 2013, CMS implemented TCM codes. TCM addresses the handoff period between the inpatient and community setting. The guidelines for TCM require the community physician's practice, typically a primary care practice, to contact the patient within two business days of discharge and conduct a follow-up visit within 7 or 14 days, depending on the complexity of medical decision making involved. Without the necessary discharge information, the proactive management of the patient population cannot occur within the allotted two-day time frame.

Unfortunately, lack of communication between hospitals and the patient's primary care physician hampers effective TCM, which, in turn, may lead to duplicative imaging and lab testing, difficult medication reconciliation, an increased risk of readmission, and poorer outcomes. All of these things, in turn, serve to increase the cost of care and decrease the quality.

HIPAA privacy rules permit doctors, nurses, and other health care providers, as "covered entities," to share patient information for treatment without signed patient consent. However, in some instances, the primary care physician is not identified or documented at the time of an acute care hospital admission. This creates a barrier to receiving discharge information required for timely follow-up with the patient under TCM.

The AAFP is educating its members about the importance of working with their local hospitals to improve transitions of care. Since hospitals are being held responsible for readmissions and higher standards of quality, we imagine the American Hospital Association is also educating its members about the importance of working with community primary care physicians to accomplish smooth care transitions. If there are opportunities to work together to improve care transitions, we are open to collaboration. In any case, your assistance in encouraging hospitals to collect information on the primary care provider and timely release of discharge summaries and instructions from hospitals to primary care physicians to promote smooth care transitions would be most appreciated.

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The AAFP recognizes the importance of collaboration to achieve the goals of improved care coordination to reduce healthcare costs and improve quality. Together, our combined efforts may ensure the most vulnerable patients receive the care they need following a hospital discharge.

Thank you for your time and consideration of this request. If you or your staff has any questions about this matter, please contact Karen Breitkreutz, Delivery System Strategist, (800) 274-2237, extension 4162 or kbreitkreutz@aafp.org.

Sincerely,

Robert L. Wergin, MD, FAAP

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Board Chair