

Terminating Provider-Patient Relationship Checklist

We spend a great deal of time discussing the patients' rights in today's healthcare environment. What we also must acknowledge is that providers of healthcare services (non ED care) have the right to treat the patients they wish to treat. This includes having the right to terminate relationships with patients for a variety of reasons. As with all decisions in healthcare the decision to terminate a patient relationship should be done slowly and with proper consideration and documentation.

If the provider-patient relationship becomes untenable, the practitioner should review the patient's record to ensure it contains adequate, objective, and factual documentation that supports the decision to end the relationship. Further, to avoid allegations of abandonment, the provider should follow the healthcare practice's formal process for discharging a patient.

The following checklist contains a number of items to consider when terminating the provider-patient relationship. If it is not clear how to move forward with the patient discharge please consult with your MDIC Risk Manager or your legal counsel.

YES	NO	N/A	QUESTIONS:
			Has the healthcare provider consistently documented treatment recommendations and warnings to the patient about possible negative effects of noncompliance with treatment?
			Does the patient's record contain documentation of the patient receiving instructions and education related to care and treatment?
			Has the patient repeatedly refused to obtain needed screening or treatment?
			Has the patient made complaints or accusations against the practice, made inappropriate remarks, or displayed threatening or unsuitable behavior?
			If yes to above question, have these issues been documented objectively in the patient's record (using quotation marks where relevant to preserve the patient's actual statements)?
			Does documentation objectively note that the healthcare provider and staff have attempted to resolve the problems or address the issues?
			Do behavioral issues prevent the provider and patient from working together as a team?
			Is the patient at a critical juncture in, or in the midst of, treatment (such as chemotherapy or dental work)?
			Are there geographical or clinical specialty issues that may prolong the patient finding appropriate alternative care?
			Has the patient been given adequate time to respond to letters regarding compliance or payment?
			Prior to terminating the relationship due to payment issues, has the provider verified whether any contract (e.g., an MCO, HMO, or PPO) obligates continued provision of care?

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