

7 Ready-To-Use Policies Every Medical Office Should Have



From the Editors at Medical Office Manager



Special Report:

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Introduction

Special Report: 7 Ready-To-Use Policies Every Medical Office Should Have

A medical office needs policies to ensure compliance with healthcare regulations, laws and standards of care, to guide decision-making and actions, and to promote a safe and efficient work environment.

Policies can also help to establish clear expectations and responsibilities for staff, and can protect the medical office from potential legal liability. Additionally, policies can provide a framework for dealing with sensitive issues such as patient privacy, infection control, and handling of sensitive health information.

Here are seven essential policies for your medical office.

Policy 1

Model Policy: Progressive Discipline and Employee Termination

Why you need this policy:

There's no point in having any policies, procedures, and standards unless you're prepared to discipline employees who disobey them. The problem is that discipline is not only unpleasant but likely to result in some form of legal grievance, especially if the employee belongs to a union. That means you'll end up having to defend your action before an arbitrator or court.

How this policy helps you:

Luckily, there's a technique you can use to make punishments stick if they're challenged later on. Better yet, this technique can help you straighten out wayward employees and avoid showdowns. The technique is called progressive discipline and it involves imposing a series of gradually sterner punishments. It usually starts with warnings for a first offense, mounts to suspensions and ultimately dismissal. At each stage you confront the employee, explain what he did wrong, impose the appropriate punishment and warn him to clean up his act.

How to use this policy:

You must establish a written policy or procedure giving you the right to use progressive discipline. This Model Policy is a fairly generic version, which allows for warnings, followed by suspension and ultimately termination. But you'll need to modify the Model Policy to reflect your own progressive discipline procedures and the terms of discipline provisions contained in any applicable collective bargaining agreements (if your employees are in a union).

Model Policy: Progressive Discipline and Employee Termination

XYZ Medical Group

1. Statement of policy

Although XYZ Medical Group is prepared to use discipline to enforce its Code of Conduct and organizational policies, procedures, and standards, management of XYZ Medical Group will also, where circumstances permit, seek to apply discipline in a progressive manner that involves:

- Notifying employees of their wrongdoing;
- Providing employees a fair opportunity to correct their violations; and
- Imposing harsher discipline for repeat offenses up to and including termination when XYZ Medical Group determines that progressive discipline has run its course and no longer offers a reasonable chance to redeem the employee.

2. Purpose of policy

XYZ Medical Group has established this Progressive Discipline Policy to explain the organization will use progressive discipline to hold employees accountable and provide the basis for effective and fair enforcement of its Code of Conduct, policies, procedures, and standards.

3. Scope—*serious offenses not subject to progressive discipline*

This policy applies to employee offenses that can be corrected. XYZ Medical Group reserves the right to impose more serious penalties up to and including immediate termination without following the sequence provided under this progressive discipline policy in response to offenses XYZ Medical Group deems highly serious and permanently damaging to the employer-employee relationship, including but not limited to, acts of violence, theft, deliberate violations of patient privacy or trust, insolence and insubordination. Such serious offenses may result in immediate termination without warning or suspension even if they represent an employee's first offense.

4. Verbal warning

Employees who commit a first offense will receive one verbal warning. Upon receiving a verbal warning, the employee will be given an explanation of the infraction and corrective action

required, an opportunity to explain and notification that further offenses will result in more serious penalties. A note stating that the verbal warning was given listing the time, date and reason will be kept in the employee's personnel file.

5. Written warning

Second offenses will result in a written warning which will be recorded on the XYZ Medical Group disciplinary log. A copy of the warning will be sent to the employee, the XYZ Medical Group human resources department and the union and kept in the employee's personnel file.

6. Suspension

Third offenses will result in suspension for a period considered appropriate under the circumstances. A copy of the suspension notice will be sent to the XYZ Medical Group human resources department and the union and kept in the employee's personnel file.

7. Termination

Fourth offenses will result in immediate termination. The supervisor responsible for the employee will be informed immediately and he/she will remove the employee from the site. A copy of the termination notice will be sent to XYZ Medical Group human resources department and the union. In addition, the employee shall be given an opportunity to contest the dismissal at a hearing to the extent required by an applicable collective bargaining agreement.



Policy 2

Model Policy: Patient Billings, Collection and Financial Policy

Why you need this policy

Doctors have every right—and need—to be paid. But getting patients to pay their bills on time is a major challenge that forces you to confront a bewildering array of regulatory requirements, managed care and insurance contracts, and ethical constraints stemming from the doctor-patient relationship.

How this policy helps you

The centerpiece of juggling all of these requirements is to establish a financial policy that tells patients how they will be billed for the services they receive. In addition to laying the legal groundwork for billing and collection, including by a third party collection agency, a well-crafted financial policy plays a key role in providing effective communications with patients and preventing misunderstandings that can fester into nasty payment disputes.

How to use this policy

This Model Policy is for a medical group practice and is based not on any single example but a “greatest hits”-type of amalgamation of best practices and cutting-edge provisions from provider models across the United States. Of course, no two offices do all things exactly the same way. So you’ll need to modify the Policy—particularly the provisions regarding insurance—to your own circumstances, including the provisions of contracts with insurers and payers you deal with, as well as any regulatory requirements that apply in your particular state or city.

Patient Billings, Collection and Financial Policy

XYZ Medical Group

1. Statement of policy

The physicians and staff of XYZ Medical Group are pleased to welcome you to our facility and to let you know that we are dedicated to not only providing you the very best medical treatment but to ensuring that your patient experience is a pleasant one.

2. Purpose

We have developed these financial policies to help you understand our patient billing policies and procedures to avoid any miscommunications about the handling of your bills and accounts. Being familiar with and following this Policy will go a long way in ensuring you a pleasant patient experience and maintaining the understanding and respect that are so important to the physician-patient relationship.

If you have any questions or do not understand any aspects of this Policy, please contact the XYZ Medical Group [list contact person(s) or department and information].

3. Check your coverage before making an appointment

We fully understand that health insurance plans and benefits can be quite confusing. But we also want to remind you that it is your responsibility to be familiar with the key aspects of your benefits plan, including whether it covers the specific treatment you seek from XYZ Medical Group. If you are unsure of your coverage, we ask you to please call your insurance provider using the customer service telephone number listed on your insurance card before scheduling your appointment with XYZ.

4. Registration

When you arrive for your initial visit to XYZ, one of our patient service representatives will collect your billing information including your:

- Address;
- Telephone number;
- Social security number;
- Birth date;

- Insurance information;
- Employer information;
- Emergency contact information;
- [List any other patient information you collect during registration.]

Keeping this information up-to-date is very important. Accordingly, when you arrive for each subsequent visit to XYZ, one of our receptionists may ask you to verify that this information remains true and revise information that is no longer up-to-date before you see a physician.

5. Billing and payment

Patients are ultimately responsible for paying for the care they receive even if they have insurance coverage. For your convenience, XYZ Medical Group accepts cash, personal checks, and [list the credit cards your practice accepts].

- a) Health Insurance:** If you will be using health insurance to settle your account, you will be asked to present your current insurance card at each visit. This includes federal Medicare and [state name] Medicaid. XYZ will also collect any co-insurance payment that applies under your insurance for the visit.

XYZ will gladly file a claim on your behalf with your health insurance company for the treatment you receive. We will file an initial claim based upon the information that you provide to us. Under state law, your insurance company has [fill in] days to process and pay the claim, request more information, or deny the claim and notify us of the decision. If does not notify us within [fill in] days of the date of service, it will be assumed that your insurance coverage is no longer in force and you will be responsible for the unpaid balance. You are also responsible for services you receive from XYZ that your health insurance plan does not cover.

- b) Self-pay:** [Insert your practice's self-pay policy. Example:] If you are self-pay, you will be expected to pay the day's charges on the day of the service. You will also be billed for any additional charges for tests and other services delivered after your visit. If you are having surgery, you will be expected to make mutually agreeable payment arrangements before receiving the service. If the service is considered elective, payment must be made in full before services are performed.

- c) Workers' Compensation:** [Insert your practice's workers' comp policy, if any. Example:] XYZ Medical Group physicians provide services under workers' compensation plans. If you need to see a physician for an injury or illness related to your employment, please have your employer or workers' compensation case manager make the appointment for you. You will need to provide us with the case number as well as the address to which the bill is to be sent.
- d) Discounts:** [Insert your practice's discount policy, if any. Example:] XYZ Medical Group offers discounts of 10% to patients who pay for the services they receive in cash. Patients who pay their bills on or before the date payment is due may also receive discounts of 15%.
- e) Financial assistance:** [Insert your practice's financial assistance policy, if any. Example:] XYZ Medical Group offers financial assistance to needy patients through its XYZ Financial Help Program. To qualify for such assistance, you must complete an application listing information about your current financial situation within 30 days of the date you receive services from XYZ. Contact the XYZ Medical Group office manager, Betty Jones, at (123) 456-7890, or bettyjones@XYZmedicalgroup.com, for more information about the XYZ Financial Help Program.

6. Uncanceled appointments fee

XYZ requests that patients please give at least 24 hours' notice (one business day) if they will not be able to keep their appointment. Patients who fail to provide appropriate notice will be charged a cancellation fee of \$50.

7. Returned checks fee

XYZ Medical Group will charge a returned check fee of \$35 for any returned check returned by your bank for non-payment (insufficient funds).

8. Billing statements and invoices

XYZ will send you an itemized billing statement listing each thing you are being billed for and the balance due for the item from both you and your insurance company. Patients with a personal balance will receive a monthly statement showing the specific amounts due. These statements are due upon receipt. Because the posting of payments can sometimes be posted some days

after the day of payment, there is a chance that payments made by you or your insurance company will not appear on the statement. These payments will be reflected in your next billing statement. If they do not, please contact an XYZ Medical Group patient services representative so we can investigate and determine what to do about the situation.

9. Past due accounts

Past-due accounts are not just an inconvenience; they cost XYZ Medical Group money and time. Accordingly, patients with delinquent accounts will be required to make payment at the time of service. If you are unable to make mutually agreeable payment arrangements at that time, we will be glad to reschedule your appointment to a time when you will be able to pay. XYZ also charges interest at an annual rate of [list %] on all past due patient balances.

10. Collections

XYZ Medical Group will refer the following accounts to a third party collection agency:

- Accounts with balances over \$200 that are older than 90 days;
- Accounts with balances over \$500 that are older than 120 days;
- Failures of patients to honor agreed-upon payment terms under a settlement or rescheduling agreement regardless of the amount due or age of the account.

If XYZ refers your account to a collection agency, you must pay all past due amounts or make agreeable payment terms before you can schedule any more appointments with XYZ physicians. Failure to make payments and honor repayment agreements may also be grounds for XYZ Medical Group to terminate you as a patient under its Patient Termination Policy.

11. Billing questions and concerns

If you have any questions or concerns regarding your account or insurance claim, including what you think may be errors in your billing statement, contact the XYZ Medical Group patient services department. Our representatives will make every effort to assist you, clarify any misunderstandings, and provide you the information you need to resolve your problem and restore your account to good standing.



Policy 3

Model Policy: OSHA Bloodborne Pathogens Exposure Control

Why you need this policy:

All medical practices need infection control policies and procedures. And with regard to one particular form of infection—bloodborne pathogens that get into the bloodstream via puncture or piercing by contaminated needles or other medical sharps—QA measures must include a specific exposure control policy that meets the requirements of the federal workplace safety law called OSHA (the Occupational Safety and Health Act)—specifically, the regulation or “standard” dealing with bloodborne pathogens.

How this policy helps you:

The Model Policy below comes right from OSHA itself, i.e., the agency that enforces the bloodborne pathogens standard. We’ve altered it only slightly and in a nonsubstantive way to make it work for medical practices.

How to use this policy:

Because it comes from the government agency, you don’t want to make massive revisions to this Model Policy. However, you will have to fill in the blanks by listing information that applies to your practice, e.g., who at the practice is in charge of the exposure control policy, selecting needleless systems, etc. Just look for the italicized language in the Model Policy to identify the blanks that need filling.

Model Policy: OSHA Bloodborne Pathogens Exposure Control

XYZ Medical Group

1. Statement of policy

XYZ Medical Group recognizes the hazards posed by exposure to bloodborne pathogens, i.e., bacteria, viruses and other biological agents that can cause illnesses upon entering the blood stream, and is committed to protecting its staff from these dangers and ensuring all personnel a safe and healthful workplace.

2. Purpose of policy

XYZ Medical Group has adopted this Exposure Control Policy (ECP) to eliminate or minimize employees' occupational exposure to bloodborne pathogens in accordance with OSHA standard 29 CFR 1910.1030, "Occupational Exposure to Bloodborne Pathogens."

The ECP is a key document that XYZ Medical Group will use to implement and ensure compliance with the standard and protect our employees.

3. Definition of "employee"

For purposes of this ECP, "employee" refers to any individual employed by XYZ Medical Group, including physicians, medical professionals and assistants, administrative personnel, temporary and per diem workers, and volunteers.

4. Roles and responsibilities

The following XYZ Medical Group individuals or departments will be responsible for implementing different aspects of this ECP:

- a) Overall implementation:** *[Name of responsible person or department]* is/are responsible for overall implementation of the ECP, including maintaining, reviewing and updating the ECP at least annually, and whenever necessary to include new or modified tasks and procedures. Contact location/phone number *[list]*:
- b) Exposed personnel:** XYZ Medical Group employees who are determined to have occupational exposure to blood or other potentially infectious materials (OPIM) must comply with the procedures and work practices outlined in this ECP.

- c) **PPE and other controls:** [Name of responsible person or department] will provide and maintain all necessary personal protective equipment (PPE), engineering controls, e.g., sharps containers, labels, and red bags as required by the OSHA standard and ensure that adequate supplies of such equipment are available in the appropriate sizes. Contact location/phone number [list]:
- d) **Medical actions and records:** [Name of responsible person or department] will be responsible for ensuring that all medical actions required by the OSHA standard are performed and that appropriate employee health and OSHA records are maintained. Contact location/phone number [list]:
- e) **Training:** [Name of responsible person or department] will be responsible for training, documentation of training, and making the written ECP available to employees, OSHA, and National Institute for Occupational Safety and Health (NIOSH) representatives. Contact location/phone number [list]:

5. Employee exposure determination

- f) **All employees exposed:** The following is a list of job classifications at the XYZ Medical Group facility in which all employees have occupational exposure:

Department/Location	Job Description/Title
➤ Clinical lab	➤ Phlebotomists
➤ Etc.	➤ Etc.

- g) **Some employees exposed:** The following is a list of: i. all job classifications at the XYZ Medical Group facility in which some employees have occupational exposure; and ii. tasks and procedures, or groups of closely related tasks and procedures, in which occupational exposure may occur for these individuals:

Department/Location	Job Desc./Title
➤ Disposal area	➤ Maintenance staff
➤ Etc.	➤ Etc.

Task/Procedure
➤ Handling medical waste
➤ Etc.

6. Methods of implementation and control

- a) Universal precautions:** All XYZ Medical Group employees must utilize universal precautions.
- b) Exposure control policy:** All XYZ Medical Group employees covered by the OSHA bloodborne pathogens standard will receive an explanation of this ECP during their initial training session as well as a review during their annual refresher training. All employees can review this ECP at any time during their work shifts by contacting [name of responsible person or department]. Upon request, XYZ Medical Group will provide an employee with a copy of the ECP free of charge and within 15 days of the request. [Name of responsible person or department] is responsible for reviewing and updating the ECP annually or more frequently if necessary to reflect any new or modified tasks and procedures that affect occupational exposure and to reflect new or revised employee positions with occupational exposure.
- c) Engineering controls and work practices:** XYZ Medical Group will use the following engineering controls and work practice controls to prevent or minimize exposure to bloodborne pathogens:
- Non-glass capillary tubes;
 - SESIPs;
 - Needleless systems;
 - Etc. [List others]:
- Sharps disposal containers will be inspected and maintained or replaced by [name of responsible person or department] every [list frequency] or whenever necessary to prevent overfilling.
- d) Review of controls:** To ensure controls remain effective and suited to current hazards, XYZ Medical Group will:
- Identify the need for changes in engineering controls and work practices through [list review processes used, e.g., review of OSHA injury records, employee interviews, etc.]; and
 - Evaluate new procedures and new products regularly by [describe the process, literature reviewed, supplier info, products considered].

XYZ Medical Group front-line workers and management officials will participate in the above review process in the following manner: *[Describe employees' involvement]*. *[Name of responsible person or department]* will be responsible for ensuring that recommendations for changes to control made in the course of the review process are implemented.

- e) Personal protective equipment (PPE):** XYZ Medical Group will provide appropriate PPE to protect against bloodborne pathogens at no cost to those employees including *[list types of PPE available to employees such as gloves, eye protection, etc.]* PPE is located *[list location(s)]* and may be obtained from *[name of responsible person or department]* *[Specify how employees will obtain PPE and who is responsible for ensuring that PPE is available.]* XYZ Medical Group will also furnish employees training in how to use particular kinds of PPE for specific tasks or procedures. Such training will be provided by *[name of responsible person or department]*
- f) Use of PPE:** All employees using PPE must observe the following precautions:
- Washing hands immediately or as soon as feasible after removing gloves or other PPE;
 - Removing PPE after it becomes contaminated and before leaving the work area;
 - Disposing of used PPE in *[list appropriate containers for storage, laundering, decontamination, or disposal]*;
 - Wearing appropriate gloves when it is reasonably anticipated that there may be hand contact with blood or OPIM, and when handling or touching contaminated items or surfaces; replace gloves if torn, punctured, or contaminated, or if their ability to function as a barrier is compromised;
 - Discarding utility gloves if they show signs of cracking, peeling, tearing, puncturing, or deterioration *[utility gloves may be decontaminated for reuse if their integrity is not compromised]*;
 - Never washing or decontaminating disposable gloves for reuse;
 - Wearing appropriate face and eye protection when splashes, sprays, spatters, or droplets of blood or OPIM pose a hazard to the eye, nose, or mouth; and

- Removing immediately or as soon as feasible any garment contaminated by blood or OPIM, in such a way as to avoid contact with the outer surface.

g) Handling of used PPE: The XYZ Medical Group procedure for handling used PPE is as follows: [*The procedure must, at a minimum, explain where and how to decontaminate face shields, eye protection, and resuscitation equipment. You can supply this information in one of 2 ways: Option 1: Explain the actual procedure you use; or Option 2: Indicate that you will follow your already existing specific procedure and list by title or number of the procedure and the last date it was reviewed.*]

h) Housekeeping: XYZ Medical Group will use the following procedures to handle, contain, and dispose of medical waste and other potentially contaminated materials:

- Regulated waste must be placed in containers which are closable, constructed to contain all contents and prevent leakage, appropriately labeled or color-coded (in accordance with the provisions for labels set forth below) and closed before removal to prevent spillage or protrusion of contents during handling.
- The procedure for handling sharps disposal containers is: [*Option 1: Explain the actual container handling procedure you use; or Option 2: Indicate that you will follow your already existing specific procedure and list by title or number of the procedure and the last date it was reviewed.*];
- The procedure for handling other regulated waste is: [*Option 1: Explain the actual procedure you use; or Option 2: Indicate that you will follow your already existing specific procedure and list by title or number of the procedure and the last date it was reviewed.*];
- Contaminated sharps will be discarded immediately or as soon as possible in containers that are closable, puncture-resistant, leak proof on the sides and bottoms, and appropriately labeled or color-coded. Sharps disposal containers will be available at [*list locations which must be easily accessible and as close as feasible to the immediate area where sharps are used*]; and
- Bins and pails such as wash or emesis basins will be cleaned and decontaminated as soon as feasible after visible contamination. Broken glassware that may be contaminated will only be picked up using mechanical means, such as a brush and dustpan.

- i) Contaminated laundry:** The following contaminated articles will be laundered by XYZ Medical Group: *[list]*. Laundering must be performed by *[name of responsible person or department]* at *[time and/or location]* and meet the following requirements:
- Contaminated laundry should be handled as little as possible, with minimal agitation;
 - Wet contaminated laundry must be placed in leak-proof, labeled or color-coded containers before transport using *[specify either red bags or bags marked with the biohazard symbol]* for this purpose; and
 - The following PPE must be worn when handling and/or sorting contaminated laundry: *[list the required PPE for handling contaminated laundry]*.
- j) Labels:** XYZ Medical Group will use the following labeling methods in its facility: *[list]*
- Task/Procedure
 - Handling medical waste
 - Etc.
 - Label Type
 - Biohazard label
 - Red bag
 - Etc.

[Name of responsible person or department] is responsible for ensuring that warning labels are affixed or red bags are used as required if regulated waste or contaminated equipment is brought into the facility. Employees must notify *[name of responsible person or department]* if they discover regulated waste containers, refrigerators containing blood or OPIM, contaminated equipment, etc., without proper labels.

7. Hepatitis B vaccination

[Name of responsible person or department] will provide training to employees on hepatitis B vaccinations addressing safety, benefits, efficacy, methods of administration, and availability. The hepatitis B vaccination series is available at no cost after initial employee training and within 10 days of initial assignment to all employees identified in the exposure determination section of this ECP (Section 5). Vaccination will be encouraged unless:

- i. Documentation exists showing that the employee has previously received the series;
- ii. Antibody testing reveals that the employee is immune; or
- iii. Medical evaluation shows that vaccination is contraindicated.

Employees may decline the vaccination by signing the written declination form attached to this ECP as Exhibit A. Employees who decline may request and obtain the vaccination at a later date at no cost. Documentation of refusal of the vaccination is kept at *[list location]*.

Vaccination will be provided by *[list health care professional responsible for this part of the ECP]* at *[list location]*. Following the medical evaluation, XYZ Medical Group will obtain a copy of the health care professional's written opinion and provide it to the employee within 15 days of the completion of the evaluation. Such opinion will be limited to whether the health care professional believes the employee requires the hepatitis vaccine and whether the vaccine was administered.

8. Post-exposure evaluation and follow-up

Should an exposure incident occur, contact *[name of responsible person or department]* should be contacted at the following number *[list number]*. An immediately available confidential medical evaluation and follow-up will then be conducted by *[name of licensed health care professional]*. Following initial first aid (clean the wound, flush eyes or other mucous membrane, etc.), the following activities will be performed:

- i. Documentation of the routes of exposure and how the exposure occurred;
- ii. Identification and documentation of the source individual (unless XYZ Medical Group determines and can prove that identification is infeasible or prohibited by state or local law);
- iii. Obtaining consent and making arrangements to have the source individual tested as soon as possible to determine HIV, HCV, and HBV infectivity;
- iv. Documentation of the fact that the source individual's test results were conveyed to the employee's health care provider;
- v. New testing need not be performed if the source individual is already known to be HIV, HCV and/or HBV positive;

- vi. Assuring that the exposed employee is provided with the source individual's test results and with information about applicable disclosure laws and regulations concerning the identity and infectious status of the source individual such as laws protecting confidentiality;
- vii. After obtaining consent, collecting the exposed employee's blood as soon as feasible after the exposure incident and testing the blood for HBV and HIV serological status; and
- viii. If the employee does not give consent for HIV serological testing during collection of blood for baseline testing, preserving the baseline blood sample for at least 90 days; if the exposed employee elects to have the baseline sample tested during this waiting period, performing testing as soon as feasible.

9. Administration of post-exposure evaluation and follow-up

[Name of responsible person or department] must ensure that health care professional(s) responsible for employee's hepatitis B vaccination and post-exposure evaluation and follow-up are given a copy of OSHA's bloodborne pathogens standard and that the health care professional evaluating an employee after an exposure incident receives the following:

- i. A description of the employee's job duties relevant to the exposure incident;
- ii. Route(s) of exposure;
- iii. Circumstances of exposure;
- iv. If possible, results of the source individual's blood test; and
- v. Relevant employee medical records, including vaccination status.

[Name of responsible person or department] must provide the employee with a copy of the evaluating health care professional's written opinion within 15 days after completion of the evaluation.

10. Procedures for evaluating circumstances surrounding exposure incident

[Name of responsible person or department] will review the circumstances of all exposure incidents to determine:

- i. Engine
- ii. Work practices followed;
- iii. A description of the device being used (including type and brand);
- iv. Protective equipment or clothing used at the time of the exposure incident, e.g., gloves, eye shields, etc.;
- v. Location of the incident, e.g., department or work area;
- vi. Procedure being performed when the incident occurred; and
- vii. Employee's training.

[*Name of responsible person or department*] will record all percutaneous injuries from contaminated sharps in a Sharps Injury Log. If revisions to this ECP are necessary [*name of responsible person or department*] will ensure that appropriate changes are made, which may include an evaluation of safer devices, adding employees to the exposure determination list, etc.

11. Employee training

All XYZ Medical Group employees who have occupational exposure to bloodborne pathogens will receive initial and annual training conducted by [*name of responsible person or department*] [*Attach a brief description of their qualifications.*] All employees who have occupational exposure to bloodborne pathogens will also receive training on the epidemiology, symptoms, and transmission of bloodborne pathogen diseases. In addition, the training program will cover at least the following elements:

- i. A copy and explanation of the OSHA bloodborne pathogen standard;
- ii. An explanation of the XYZ Medical Group ECP and how to obtain a copy of it;
- iii. An explanation of methods to recognize tasks and other activities that may involve exposure to blood and OPIM, including what constitutes an exposure incident;
- iv. An explanation of the use and limitations of engineering controls, work practices and PPE;
- v. An explanation of the types, uses, location, removal, handling, decontamination and disposal of PPE;
- vi. An explanation of the basis for PPE selection;

- vii. Information on the hepatitis B vaccine, including information on its efficacy, safety, method of administration, the benefits of being vaccinated and that the vaccine will be offered free of charge;
- viii. Information on the appropriate actions to take and persons to contact in an emergency involving blood or OPIM;
- ix. An explanation of the procedure to follow if an exposure incident occurs, including the method of reporting the incident and the medical follow-up that will be made available;
- x. Information on the post-exposure evaluation and follow-up that XYZ Medical Group is required to provide for the employee following an exposure incident;
- xi. An explanation of the signs and labels and/or color coding required by the OSHA standard and used at this facility; and
- xii. An opportunity for interactive questions and answers with the person conducting the training session.

Training materials for this facility are available at *[list location]*.

12. Recordkeeping

- a) Training records:** XYZ Medical Group will complete training records for each employee upon completion of their training and retain them for at least three years at *[list location]*. Such training records will list:
- i. The dates of the training sessions;
 - ii. The contents or a summary of the training sessions;
 - iii. The names and qualifications of persons conducting the training; and
 - iv. The names and job titles of all persons attending the training sessions.

XYZ Medical Group will provide employee training records upon request to the employee or the employee's authorized representative within 15 working days. Such requests should be addressed to *[name of responsible person or department plus contact information]*.

- b) Medical records:** XYZ Medical Group will maintain medical records for each employee with occupational exposure as required by the OSHA standard (29 CFR 1910.1020, "Access to Employee Exposure and Medical Records.")

[*Name of responsible person or department*] is responsible for maintaining the required medical records. These confidential records will be kept in [*list location*] for at least the duration of an individual's employment with XYZ Medical Group plus 30 years.

XYZ Medical Group will provide employee medical records upon request of the employee or to anyone who has the employee's written consent to receive those records within 15 working days. Such requests should be addressed to [*name of responsible person or department plus contact information*].

c) OSHA Recordkeeping records: XYZ Medical Group will evaluate all exposure incidents to determine if the case meets OSHA Recordkeeping Requirements (29 CFR 1904). This determination and the recording activities will be performed by [*name of responsible person or department plus contact information*].

d) Sharps Injury Log: In addition to keeping records in accordance with the OSHA 1904 Recordkeeping Requirements, XYZ Medical Group will record all percutaneous injuries from contaminated sharps in a Sharps Injury Log listing, at a minimum:

- i. The date of the injury;
- ii. The type and brand of the device involved, e.g., syringe, suture needle, etc.;
- iii. The department or work area where the incident occurred; and
- iv. An explanation of how the incident occurred.

XYZ Medical Group will review this log is reviewed as part of the annual program evaluation and maintain it for at least five years following the end of the calendar year covered. If a copy is requested by anyone, it must have any personal identifiers removed from the report.

EXHIBIT A:

Hepatitis B vaccine declination form

I understand that due to my occupational exposure to blood or other potentially infectious materials I may be at risk of acquiring hepatitis B virus (HBV) infection. I have been given the opportunity to be vaccinated with hepatitis B vaccine, at no charge to myself.

However, I decline hepatitis B vaccination at this time. I understand that by declining this vaccine, I continue to be at risk of acquiring hepatitis B, a serious disease. If in the future I continue to have occupational exposure to blood or other potentially infectious materials and I want to be vaccinated with hepatitis B vaccine, I can receive the vaccination series at no charge to me.

Signed: (Employee Name) _____

Date: _____



Policy 4

Model Policy: Substance Abuse and Fitness for Duty

Workplace substance abuse remains a major challenge for workplaces. Although sound in principle, the traditional zero tolerance policy is ill-suited to the legal complexities of the modern world. This is especially true in states that have legalized marijuana. You can still take a clear and firm line on employee drug and alcohol abuse for the purpose of health and safety. But the policy also has to exhibit finesse and sensitivity to legal subtleties. One of the best ways to create an enforceable policy is to base it not on the legality of substance abuse but the undisputable fact that it renders employees unfit for duty to the detriment of safety. Here's a Model Policy you can adapt.

XYZ Medical Office Substance Abuse and Fitness for Duty Policy

1. POLICY STATEMENT

XYZ Medical Office recognizes that employees who use or are impaired by drugs or alcohol while performing work endanger not only themselves but their co-workers and others affected by the work. XYZ Medical Office' policy with regard to such conduct is one of zero tolerance and employees must be aware that any violations they commit may result in disciplinary action up to and including termination.

However, XYZ Medical Office also recognizes that addiction to drugs or alcohol is a serious health problem. The intent of this Policy is to accomplish the health and safety goal in a manner that is fair, humane and consistent with employees' accommodation rights under discrimination laws. The ultimate

goal is not to punish but to help employees identify and get help for their substance abuse issues so that they can return to work healthy, safe, happy and productive.

2. PURPOSE

The purpose of this substance abuse policy is to ensure that all employees report to work fit for duty as part of its duty to ensure the health and safety of persons at or near the workplace under the *Occupational Safety and Health Act* (OSHA) and other applicable laws.

3. SCOPE

This Policy applies to all individuals that work for XYZ Medical Office including but not limited to full-time, part-time, temporary and contract employees, independent contractors, volunteers and employees of third-party contractors or subcontractors that XYZ Medical Office engages to perform work at its facilities.

3.1 Union Employees

This Policy applies to both union and non-union employees but is not intended to supersede or circumvent the provisions of any current collective bargaining agreement that XYZ Medical Office has negotiated with an employee's union. In the event of a conflict between this Policy and a collective bargaining agreement, the latter shall control.

3.2 Contractor Employees

This Policy applies to individuals employed by contractors and subcontractors that perform work at XYZ Medical Office facilities but is not intended to supersede or circumvent the provisions of any current collective bargaining agreements that those contractors or subcontractors have negotiated with their own workers and their unions. In the event of a conflict between this Policy and a contractor employment agreement or collective bargaining agreement covering the worker, the latter shall control.

4. DEFINITIONS

For purposes of this Policy:

"Drugs" includes:

- Narcotics and illegal drugs;
- Marijuana, whether used or obtained legally or illegally; and
- Legal prescription and over-the-counter medications and drugs that cause or have the potential to cause impairment and render an employee unfit for duty.

“Fit for duty” means a state of physical and mental that allows an individual to perform his or her job duties safely and effectively without impairment due to the use of or after-effects of alcohol, illegal drugs, legal medications or other health conditions.

“On duty” includes reporting for and performing work, including:

- Scheduled work;
- Unscheduled call-in work;
- Work performed at XYZ Medical Office facilities;
- Work performed for XYZ Medical Office away from XYZ facilities, including but not limited to business travel and driving or traveling to and from work.

“Safety-sensitive job” means positions that have a direct and substantial impact on the health and safety of the employee, other workers, customers, visitors, the public, property and/or the environment, including but not limited to those involving driving, operation of machinery or equipment, handling of toxic substances and others determined by XYZ Medical Office.

“Substance abuse” means the use of alcohol, illegal drugs, legal marijuana and medications and other substances that can impair a person’s judgment, clarity and functioning and render him/her unfit for duty.

5. EMPLOYEE RESPONSIBILITIES

All employees and workers covered by this Policy are required to:

- Come to work fit for duty;
- Take reasonable care to protect the health and safety of themselves and others at the workplace at all times while on duty as required by OSHA;
- Refrain from using or being impaired by alcohol or drugs while they are on duty;

- Refrain from possessing, purchasing, selling, distributing or engaging in any other conduct involving alcohol or illegal substances or paraphernalia while they are on duty;
- Refrain from misusing or being impaired by prescription or non-prescription drugs while they are on duty;
- Notify their supervisor if they suspect that a co-worker is unfit for duty; and
- Submit for drug and alcohol testing in accordance with the XYZ Medical Office Testing Policy.

6. LEGAL MARIJUANA

6.1 No Exemption for Legal Marijuana Use

All employees must understand that marijuana is an impairing drug and that using it at work or coming to work high renders them unfit for duty in violation of this Policy.

Being impaired at work is NEVER legal regardless of the legality of the impairing substance used or how it was obtained!

6.2 Employee Duty to Notify

Employees must notify their supervisor if they are using legally prescribed medical marijuana or other legal prescription and non-prescription drugs that may cause impairment for the treatment of a medical condition. Off-duty and legal use of such drugs does not violate this Policy as long as employees are fit for duty at all times when they are on duty.

7. SUPPORT FOR EMPLOYEES WITH SUBSTANCE ABUSE ISSUES

Although XYZ Medical Office reserves the right to discipline, it also recognizes that addiction and substance abuse is a health problem. XYZ Medical Office is prepared to help employees get the counselling, treatment, rehabilitation and support they need to overcome those problems. *[Describe your office's Employee Assistance Program or other resources or programs for helping employees with substance abuse issues.]*

8. SELF-REPORTING

XYZ Medical Office strongly encourages employees with substance abuse problems to step forward and request help voluntarily. *[Describe your office's procedures for responding to self-report requests for help.]* Employees who do self-report

will not be subject to discipline as long as they have complied with their obligation to be fit for duty under this Policy.

9. FITNESS FOR DUTY MEDICAL ASSESSMENT

Employees must undergo medical assessments to ensure they are fit for duty before being placed in a safety-sensitive job. Assessments will address substance abuse and be performed:

- Prior to employment when individuals are applying for safety-sensitive jobs;
- Before current employees are transferred from non-safety-sensitive to safety-sensitive jobs; and
- Periodically for as long as the employee remains in a safety-sensitive job.

Medical assessments will be performed by qualified healthcare professionals following appropriate medical practices and results will be kept confidential to the extent required by HIPAA and other applicable personal privacy laws.

10. DISCIPLINARY INVESTIGATIONS

XYZ Medical Office may open a disciplinary investigation to check whether an employee is engaged in substance abuse or otherwise in violation of his/her fitness for duty obligations under this Policy in response to:

- Complaints or concerns by co-workers, supervisors, etc.;
- Declining performance;
- Erratic behavior;
- Involvement in safety incidents including near misses;
- Arrests for impaired driving, drug offenses and similar violations; and
- Other indications that the employee has substance abuse issues or is otherwise unfit for duty.

Investigations will be carried out in accordance with XYZ Medical Office' Disciplinary Investigation Procedures.

11. DRUGS & ALCOHOL TESTING

Employees may be tested for alcohol and drugs in accordance with XYZ Medical Office' testing policies. *[List the conditions for testing under your office's own testing policies. Be sure to address: i. Alcohol and drug testing; ii. Safety-sensitive and non-safety-sensitive employees; and iii. Random and for-cause/post-incident testing.]* Supervisors will escort

employees to the screening site for testing. Refusal to submit to testing will be grounds for immediate termination under this Policy.

12. EMPLOYEE PRIVACY RIGHTS

XYZ Medical Office recognizes that test results and related information is protected personal information under privacy laws and will keep it confidential and secure and refrain from using or disclosing it except as permitted or required by law.

13. CONSEQUENCES OF VIOLATIONS

Violation of this Policy is grounds for discipline up to and including termination in accordance with the XYZ Medical Office Progressive Discipline Policy. Employees with substance abuse issues on administrative leave may also be referred for counselling or assistance through the XYZ Medical Office Employee Assistance Program or outside agencies.

14. ASSISTANCE & REINSTATEMENT

XYZ Medical Office reserves the right to place employees with substance abuse issues on administrative leave and enter into Last Chance Agreements offering them the opportunity to return to work if they successfully complete the terms of their treatment and rehabilitation program, pass drug and alcohol tests and meet other conditions of reinstatement.



Policy 5

Model Policy: Medications Error Reporting

Why you need this policy:

Medications errors are among the medical issues for which medical practices must implement Quality Assurance (QA) standards, policies, and procedures. Although the objective is to prevent such errors, practices also must be prepared to respond effectively should they occur.

How this policy helps you:

Establishing a written Policy for dealing with medication errors is crucial. Although each practice will handle things differently, that policy should, like the Model Policy below, define “medication errors,” describe how those errors must be reported and to whom, and set out a procedure for assessment and analysis of medications error data generated by reporting.

How to use this policy:

Adapt this Model Policy for your own practices, personnel and situation.

XYZ Medical Group Medications Error Reporting Policy

1. Statement of policy

XYZ Medical Group and its physicians and medical staff are fully aware that there are inherent risks associated with prescribing medications to patients for therapeutic use, including the risk of error. XYZ Medical Group has adopted

policies, procedures, and systems governing dispensing of medications to prevent medication errors from happening in the first place. However, we also recognize the need for procedures to immediately identify, report and correct any errors that may occur.

2. Purpose of policy

The purpose of this Policy is provide for the appropriate identification, documentation, and assessment of medication errors, as well as for the education, and systems improvements necessary to minimize and respond effectively to medication errors committed by XYZ Medical Group personnel.

3. Definitions

For purposes of this Policy:

Medication error: Means any preventable event that may cause or lead to inappropriate medication use or patient harm while the medication is in the control of the health care professional, patient, or consumer, which may include a mistake in any step of the medication management process or system (e.g., selecting, prescribing, administering or monitoring), regardless of the causes, and regardless of whether or not the error reaches the patient. (Note: This definition relates to this Policy and is not intended as a legal definition of the term “medication error.”)

Medication administration record: Means any and all forms of record used to document the administration of medications.

4. Patients’ medications “rights” policy

All XYZ Medical Group personnel shall seek to properly prescribe, dispense and administer medications in accordance with the XYZ Medical Group medications policies and procedures, and the provisions on patient “Rights,” namely:

- Right patient;
- Right medication;
- Right dose;
- Right time;
- Right route/administration technique; and
- Right monitoring.

5. Reporting of medications errors

- a) Incident reporting:** All errors or events associated with the medication system or a step in the medication process must be reported using an XYZ Medical Group Incident Report form regardless of whether the error actually reaches the patient.
- b) Notifying physician/prescriber:** Physicians or the appropriate prescriber must be notified as soon as reasonable of medication errors that reach the patient when the errors:
- Are deemed to be clinically significant; and/or
 - Involve medications that are not administered as ordered. Examples:
 - i. Wrong dose;
 - ii. Wrong route;
 - iii. Omitted dose;
 - iv. Extra dose;
 - v. Medications ordered to be given STAT/NOW that are given late; and
 - vi. Medications not given at the ordered time interval.
- c) Documenting physician/prescriber notification:** Physician/prescriber notification must be documented in the medical record using the appropriate note. For medications ordered as routine that are given late, communication with the physician/prescriber must occur via documentation on the medication administration record. The physician/prescriber should be notified as above in the event that late administration is deemed clinically significant.
- d) Online reporting:** Medication errors must also be reported using the XYZ Medical sGroup online Incident Reporting System and managed according to the XYZ Medical Group Administrative Incident Reporting Policy.
- e) Trend reports:** The individual in charge of Quality Assurance for XYZ Medical Group will generate:
- Quarterly trended reports for physicians and department heads;
 - Semiannual reports and analysis for the XYZ Medical Group safety committee; and
 - Yearly reports and analysis for the XYZ Medical Group Performance Improvement Committee.

6. Incident reporting procedure

a) Incident reporting: The individual who makes or discovers the medication error must complete and submit a report using the online incident report form listing the following information:

- Name of the medication involved;
- Type of error, e.g., extra dose, improper dose/quantity, omission, wrong administration technique, etc.;
- Indication of where in the medication process the initial error occurred, e.g., prescribing, transcribing, dispensing, administering, or monitoring; and
- Possible causes of error, i.e., the primary or root cause.



Policy 6

Model Policy: Patients' Rights and Responsibilities

Why you need this policy:

One of the things that makes service delivery so tricky is that medical patients aren't just customers or consumers of services; they're a partner in a collaboration designed to ensure their health. At least they should be. Although it might be self-evident to you and your physicians, not all patients appreciate that treatment is a collaboration. So it's incumbent on you to make this clear at the very outset.

How this policy helps you:

In addition to explaining patients' rights and responsibilities, and thereby establishing the basis of a successful collaboration, this Patient Rights and Responsibilities Policy, helps your practice comply with U.S. law called the *1998 Patients' Bill of Rights Act*.

How to use this policy:

You should post a copy of this Policy in a conspicuous place in your workplace where patients can see it. Give each patient a copy of this Model Policy as part of their orientation to your practice. Some practices ask patients to sign their name to acknowledge that they've received, read, understood, and agreed to abide by the terms of the Policy. We've dispensed with the acknowledgement because we believe it creates extra paperwork to no good effect.

XYZ Medical Group Patients' Rights and Responsibilities Policy

1. Statement of policy

The physicians and staff of XYZ Medical Group share a common philosophy: Patients are to be treated not simply as customers but as partners working together to keep you healthy. We will do all we can to deliver you the best quality of medical care and a pleasant patient experience. But we will also count on you to play your part in making our collaboration a success.

2. Purpose of policy

XYZ has created this Policy to lay the groundwork for establishing and maintaining the best possible relationship with its patients, to set forth our expectations, and to inform you of and protect your rights and responsibilities as a patient in accordance with a U.S. law called the *1998 Patients' Bill of Rights Act*, (copies of which are posted in prominent areas throughout the XYZ Medical Group facility where patients can easily see them).

3. Your rights as a patient

As a patient of XYZ Medical Group, you have the right to:

- Receive medically necessary treatment delivered without discrimination based on race, color, creed, religion, national origin, gender, sexual orientation, disability, age, or marital status;
- Receive quality services that are appropriate to your care needs delivered in a timely manner;
- Receive treatment that is considerate, safe, dignified and respectful;
- Receive complete information from your physician about your diagnosis, treatment, evaluation, and prognosis in terms and language you understand;
- Know the identity and professional status of individuals providing medical services to you including the physician who has primary responsibility for your care;
- Change primary or specialty physician or be referred to another facility to the extent available;

- Refuse experimental treatments or procedures or participate in medical research;
- Complete an advanced directive setting out your wishes regarding your health care should you become incapacitated or unable to express your desires;
- Consult with a specialist at your request and expense;
- Be notified by your physician about the medical risks associated with your treatment and other medically relevant information necessary to enable you to give informed consent before receiving the treatment;
- Refuse treatment and participate in decisions involving your own healthcare (except when such participation is contraindicated for medical reasons);
- Seek a second opinion with regard to your treatment;
- Have your medical records, history, and other personal health and private information kept confidential and not collected, used, or disclosed without your authorization (except where XYZ Medical Group is permitted or required by law to collect, use or disclose that information without your authorization);
- Not have your care interrupted should your treating physician leave XYZ Medical Group;
- Obtain access to your medical records, history, and other personal health and private information;
- Be billed fairly in accordance with the terms set out in the XYZ Medical Group Financial Policy;
- Examine and receive an explanation of your financial obligations regardless of who pays for your treatment; and
- To ask questions and express concerns, complaints, grievances or comments regarding your medical treatment, billing or any other aspects of your experience as a patient of XYZ Medical Group.

4. Your responsibilities as a patient

As a patient of XYZ Medical Group, you are responsible for:

- Knowing about the terms of your insurance plan, including the benefits it covers;
- Scheduling appointments in advance in accordance with the terms of the XYZ Medical Group Patient Scheduling and Appointments Policy;

- Furnishing XYZ Medical Group accurate and up-to-date information about your current complaints, medical history, medications, allergies, insurance and other pertinent data;
- Showing up on time for all scheduled appointments;
- Notifying XYZ Medical Group at least 24 hours in advance when you are unable to keep a scheduled appointment;
- Listening to your physicians, following the terms of the treatment they prescribe, and asking questions if you don't understand their instructions;
- Immediately notifying your physician of important changes in your conditions or after you receive emergency care;
- Treating all XYZ Medical Group physicians, staff, fellow patients, and visitors with courtesy and respect;
- Making all required co-payments;
- Ensuring that you fulfill your responsibilities with regard to payment of your treatment in accordance with the XYZ Medical Group Financial Policy;
- Obeying all health and safety regulations when you come to the XYZ Medical Group facility, including the ban on smoking and use of infection control measures such as masking.



Policy 7

Model Policy: Patient Termination

Why you need this policy:

There are lots of legitimate reasons to want to terminate a patient. In the best case scenario, termination makes sense when the patient is “cured” and no longer needs to see the doctor. More often than not, termination is necessitated by less favorable changes in medical conditions and often for aspects of the relationship having nothing to do with treatment—like a patient’s violence, theft and other inappropriate behavior. Unfortunately, as a matter of law and ethics, terminating a patient isn’t a simple matter.

How this policy helps you:

This Model outlines the provisions to include in a patient termination policy.

How to use this policy:

Give all new patients a copy of this Policy as part of their orientation package.

XYZ Med Patient Termination Policy

1. Statement of policy

To provide the best quality medical care and a pleasant patient experience, all patients are expected to carry out their responsibilities under the XYZ Medical Group Patients’ Rights

and Responsibilities Policy. XYZ reserves the right to terminate any patient who fails to meet these responsibilities.

2. Purpose of policy

XYZ Medical Group regards the termination of a patient as a last resort to be used only after attempts to resolve problems prove unsuccessful. The purpose of this Policy is to explain the grounds and procedures for termination. Our hope and expectation is that by making patients aware of the termination process, XYZ Medical Group will never have to actually resort to it.

3. Grounds for termination

- 1) Termination for misconduct:** XYZ Medical Group may terminate patients for behavior that it believes permanently and irreversibly damages the physician-patient relationship and the respect and on which it rests, including a patient's:
 - a) Persistent refusal to follow prescribed treatment protocols and procedures;
 - b) Tampering, altering, improper or illegal use of prescriptions or medications;
 - c) Lying, furnishing false information, or misrepresenting the truth;
 - d) Acting in violent, harassing or abusive way to XYZ Medical Group physicians, staff, patients, or visitors;
 - e) Theft of any XYZ Medical Group property;
 - f) Persistent failure to pay bills and honor financial obligations under the XYZ Medical Group Financial Policy;
 - g) Persistent failure to keep appointments and honor the terms of the XYZ Medical Group Patient Scheduling and Appointments Policy; and
 - h) Engaging in any other misbehavior that XYZ Medical Group, in its sole discretion, considers permanently damaging to the physician-patient relationship.
- 2) Termination for medical reasons:** XYZ Medical Group may also terminate patients for medical reasons to the extent it determines that continuing to treat the patient is no longer necessary or beneficial to the patient's health and termination of treatment is in the patient's best interest.

4. Termination procedure

- 1) **Immediate termination:** XYZ Medical Group reserves the right to immediately terminate patients who commit offenses that it deems to intolerable. For example, patients can be terminated for engaging in acts of physical violence even if it is a first offense.
- 2) **Progressive discipline:** For less serious offenses, XYZ Medical Group will seek to use a system of progressive discipline that gives patients an opportunity to correct their offenses and terminated only when such attempts to fix the problem prove ineffective. Where possible, XYZ will use the following progressive discipline procedure:
 - a) Patients will receive a verbal warning after they commit a first offense that notifies them of what they did wrong and alerts them that they face additional discipline for further offenses;
 - b) Patients who commit further offenses will receive a written warning and may be asked to enter into a written probationary agreement requiring them to meet certain conditions to continue to receive care from XYZ Medical Group;
 - c) Patients who violate the terms of their probationary agreement may then be terminated.
- 3) **Termination letter:** XYZ Medical Group will send any patient terminated in accordance with this Policy a letter listing:
 - a) A statement of the reason(s) for termination;
 - b) The date on which the termination takes effect; and
 - c) A statement for the patient to sign authorizing XYZ Medical Group to send his/her medical record to the new physician; and
 - d) A process the patient can use to appeal or comment on the termination.

5. Termination must not harm patient's health

XYZ Medical Group will not terminate any patient, regardless of offenses committed, if it determines that terminating the treatment they receive from XYZ will endanger their health and that the patient can't receive equally effective treatment

from a medical provider. Where possible, XYZ Medical Group will give terminated patients a grace period of up to 30 days to find a new physician and make appropriate treatment arrangements before the termination takes effect.





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