CMS E-NOTIFICATIONS
CONDITION OF PARTICIPATION

Admit, Discharge and Transfer
Electronic Notifications

CMS CONDITIONS OF PARTICIPATION

New CMS Conditions of Participation require all hospitals, psychiatric hospitals, and Critical Access Hospitals utilizing an electronic medical records system or other electronic administrative system which is conformant with the content exchange standard HL7 v2.5.1 to make a reasonable effort to send real time electronic notifications:

AT: the point of inpatient and observation admission, discharge, transfer and at emergency department presentation or discharge

TO: Every patient’s established PCP, established primary care practice group or entity, other practitioners/practice groups/entities identified by the patient as primarily responsible for his or her care, and applicable post-acute providers who need to receive notification for treatment, care coordination, or quality improvement purposes.

CONTAINING: At minimum patient name, treating practitioner name, and sending institution name

EFFECTIVE: Fall 2020

In order to achieve compliance, hospitals must meet the below requirements.

WHAT DATA NEED TO BE SHARED?

☐ Send real-time e-notifications containing patient name, treating practitioner name, and sending institution name at the point of patient admission, discharge, and transfer for ED, inpatient, and observation patients*

TO WHOM DO YOU NEED TO SEND DATA?

☐ Send notifications to patient-identified practitioners
  - Established primary care practitioners
  - Other practitioners primarily responsible for a patient’s care

☐ Have the ability to meet e-notification requirements for all recipients who need to receive notifications for purposes of treatment, care coordination, and quality improvement

☐ Entities affiliated with a patient’s primary care practitioner including:
  - Primary Care Practices
  - Accountable Care Organizations
  - Federally Qualified Health Centers
  - Physician Organizations
  - Independent Physician Associations

☐ Post-acute services providers and suppliers with whom the patient has an established care relationship prior to admission or to whom the patient is being transferred or referred including:
  - Skilled Nursing Facilities
  - Home Health Agencies
  - Hospices
  - Inpatient Rehab Facilities
  - Long-term Acute Care Hospitals

* Following data elements encouraged but not required: chief complaint, medication profile, discharge disposition, and diagnoses

This compliance checklist has been produced by PatientPing, Inc for educational purposes only.

For more information visit: www.adtnotifications.com