 <b>JOHNS HOPKINS</b> MEDICINE JOHNS HOPKINS HEALTH SYSTEM	<b>The Johns Hopkins Health System          Policy &amp; Procedure</b>	<i>Policy Number</i> FIN067
	<i>Subject</i>	<i>Effective Date</i> 02-15-09
	CANCELLED ADMISSIONS/REGISTRATIONS	<i>Page</i> 1 of 6
		<i>Supersedes</i> 05-12-06

## POLICY

**This policy applies to The Johns Hopkins Health System Corporation (JHHS) and the following affiliated entities: The Johns Hopkins Hospital (JHH), Johns Hopkins Bayview Medical Center, Inc. (JHBMC), Howard County General Hospital (HCGH) and Johns Hopkins Community Physicians (JHCP).**

### Purpose

The purpose of this policy is to ensure that the Admitting Office or designated authorization group and all outpatient areas cancel admissions, transfers, and scheduled outpatient appointments at the time of notification, and that these cancellations are communicated to all appropriate areas, beginning with the attending physician, surgeon, applicable ancillary service department and the Patient Financial Services Department.

This policy applies to all patient types for the above outlined affiliates. For the purposes of this policy, the cancellation of appointments applies only to specific areas with scheduled medical encounters. Registrations will not be canceled or deleted when specific medical encounters are canceled according to the procedures outlined in this policy.


An admission will be canceled when a patient fails to appear for the expected admission or transfer, or when the patient (or patient's representative) notifies the affiliate that the patient will not be presenting for the expected admission or surgery. Furthermore, admissions and transfers will be canceled when the patient fails to arrive in time to be included in the applicable daily reporting (midnight census) and reconciliation of admissions. Scheduled outpatient visits will be canceled when the patient has failed to appear in time to be seen. Patients scheduled to receive specific hospital services will be notified as soon as possible if those services will not be available at the time of their scheduled admission or transfer. Prior to canceling the visit, contact should be made to the physician's office to find out if the visit will be rescheduled.

Prompt notification of canceled admissions and transfers to the Admitting Dept/Authorization Group is important for the following reasons:

1. To inform HMOs regarding current authorizations/certifications which are date-specific to the admission or outpatient encounter;
2. To properly reconcile the patient census;
3. To achieve accurate and timely hospital and professional fee billing.

Any charges incurred by patients who cancel an admission or registration will be billed on an outpatient basis to the patient and/or his triaged insurer. Patients who leave the Emergency Department after they are registered but before they are triaged will not be charged for a visit.

Any charges incurred by patients who are cancelled after the patient is taken into the treatment room (ex. Operating room, Stereotactic room etc.) will be billed accordingly. These charges are for actual supplies used and time that the patient was actually in the room. However, the outpatient surgery fee will not be charged unless a surgery is actually performed. In the case where charges are to be billed, the visit is not to be canceled.

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	<i>Subject</i> <b>CANCELLED ADMISSIONS/REGISTRATIONS</b>	<i>Effective Date</i>	02-15-09
		<i>Page</i>	2 of 6
		<i>Supersedes</i>	05-12-06

**REFERENCES**


**JHHS Finance Policies and Procedures Manual**

Policy No. FIN044 - Inpatient Admission and Financial Responsibility

Policy No. FIN064 - Third Party Billing Practices

**RESPONSIBILITIES**

Admitting Officer	<p>Receive notice of cancellation or identify "no-shows" by comparing actual admissions with scheduled admissions.</p> <p><i>For JHH</i>, prepare the Canceled Admissions form and send one copy to the Inpatient Business Office and one copy to Admitting Supervisor or Assistant Director of Admissions.</p> <p><i>For JHBMC</i>, notify Admissions and Utilization Review Coordinator of the cancellation.</p> <p><i>For HCGH</i>, identify "no shows" by comparing actual admissions with scheduled admissions.</p> <p>Notify patient care unit and shift coordinator if the cancellation is for the current day.</p>
Admitting Supervisor/Assistant Director of Admissions	<p>Cancel the inpatient admission record, transferring any charges to an outpatient record. E-mail manager of Revenue Control to transfer charges.</p> <p>Document relevant financial information in patient's records.</p>
Pre-Certification Nurse (JHH)	<p>Process the Canceled Admissions Form.</p>
Dedicated Authorization Group (HCGH)	<p>Contact the insurer or certification agent and notify of cancellation.</p>
Outpatient Registration and JHCP Registration	<p>Identify patient as a "no-show" through reconciliation of scheduled appointments to completed appointments, or through receipt of notification of cancellation.</p>
Dedicated Authorization Group (HCGH)	<p>Cancel registrations or appointments in automated system. Bill any charges incurred using an outpatient bill type to the appropriate insurer(s) or to the patient directly.</p>
Schedulers-Ancillary Services (HCGH)	<p>Identify patient as a "no show" or enter cancellation reason by changing the status of the appointment in (CWS) Community Wide Scheduling module. For a referred visit, the appointment date may be changed rather than canceling if rescheduled.</p>

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	<i>Subject</i>	<i>Effective Date</i> 02-15-09
	CANCELLED ADMISSIONS/REGISTRATIONS	<i>Page</i> 3 of 6
		<i>Supersedes</i> 05-12-06


**SPONSOR**

Senior Director, Patient Finance (JHH, JHHS, JHBMC, HCGH)  
 Senior Director of Finance (JHCP)

**CYCLE REVIEW**

Three (3) years

**APPROVAL**


  
 Vice President of Finance/CFO and Treasurer, JHHS

7-9-09  
 Date

**PROCEDURES – JHH**

A. Inpatient

1. Admitting Officer
  - a. Receive notice of cancellation from patient or patient's physician, or identify a "no-show" by review of the Pre-Admissions listing.
  - b. Cancel the admission in the automated system and prepare the "Change of Information for Scheduled Patients" indicating canceled admission, sending one copy to the Inpatient Billing Office. If the cancellation is for the current day, also notify the patient care unit.
  - c. Create an outpatient registration and transfer any charges related to the scheduled admission (i.e., pre-admit testing) to this outpatient Financial Services.
2. Pre-Certification Nurse
  - a. Receive the Change of Information form.
  - b. Contact the insurer or certification agency, as appropriate, to notify of the cancellation and request new certification if the admission has been rescheduled.
3. Billing/Collection
  - a. Bill any charges associated with the scheduled admission, using an outpatient bill type.

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	<i>Subject</i>	<i>Effective Date</i> 02-15-09
	CANCELLED ADMISSIONS/REGISTRATIONS	<i>Page</i> 4 of 6
		<i>Supersedes</i> 05-12-06


B. Outpatient

1. Outpatient Registrar
  - a. Receive notice of cancellation from patient or patient's physician, or identify a "no-show" by reconciliation of the scheduled appointments to completed appointments.
  - b. Notify procedure areas (e.g., Surgery, Pain Treatment, Endoscopy) of cancellation if notification received in advance of the scheduled visit.
  - c. Cancel appointments and registration in the automated system.

PROCEDURES - JHBMC

A. Inpatient

1. Admitting Officer
  - a. Receive notice of cancellation from patient or patient's physician, or identify a "no-show" by review of the Pre-Admissions Listing.
  - b. Cancel the admission in the automated system and prepare the "Change of Information for Scheduled Patients" indicating canceled admission, sending one copy to the Inpatient Billing Office. If the cancellation is for the current day, also notify the patient care unit.
  - c. Create an outpatient registration and transfer any charges related to the scheduled admission (e.g., pre-admit testing) to this outpatient Financial Services.
2. Utilization Review Coordinator
  - a. For Medical Assistance and HMO patients, contact the insurer or certification agency as appropriate to notify of the cancellation and request new certification if the admission has been rescheduled.
3. Pre-Billing Financial Counselor
  - a. For Blue Cross and other commercially insured patients, contact the insurer or certification agency as appropriate to notify of the cancellation and request new certification if the admission has been rescheduled.
4. Billing/Collection
  - a. Bill any charges associated with the scheduled admission using an outpatient bill type.

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	<i>Subject</i>	<i>Effective Date</i>	02-15-09
	<b>CANCELLED ADMISSIONS/REGISTRATIONS</b>	<i>Page</i>	5 of 6
		<i>Supersedes</i>	05-12-06

B. Outpatient


1. Outpatient Registrar
  - a. Receive notice of cancellation from patient or patient's physician, or identify a "no-show" by review of the scheduled patients roster.
  - b. Notify procedure areas (e.g., Surgery, Pain Treatment, Endoscopy) of cancellation if notification received in advance of the scheduled visit.
  - c. Cancel registration in the automated system.
2. Billing/Collection
  - a. Bill any charges associated with the canceled visit.

PROCEDURES – JHCP

1. Registration
  - a. Identify patient as a "no-show" through reconciliation of scheduled appointments to completed appointments, or through receipt of notification of cancellation.
  - b. Cancel registrations or appointments in automated system.

PROCEDURES – HCGH

1. Registration/Admitting
  - a. Identify patient as a "no show" through reconciliation of scheduled appointments to completed appointments, or through receipt of notification of cancellation.
  - b. Once its determined patient was a no-show, check Meditech to see if the visit was rescheduled. If so, print a new facesheet and return the paperwork to the HIM staff.
  - c. Contact the Physician's office or scheduling department to determine if the admission/appointment has been rescheduled. If the appointment was rescheduled, change the appointment date instead of canceling.
  - d. For scheduled Inpatient cases in which after the census is checked the IP visit# has not been activated however, the patient is listed in the OR/PACU, the Bed Control staff will contact the OR/PACU directly to determine if the patient will be admitted or discharged directly from the PACU and remain in an OP status.
  - e. Cancel registrations or appointments in automated system

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	CANCELLED ADMISSIONS/REGISTRATIONS	<i>Page</i> 6 of 6
		<i>Supersedes</i> 05-12-06

that will not be rescheduled.

2. Scheduling-Ancillary Services
  - a. Identify patient as a "no-show" or enter other cancellation reason by changing the status of the appointment in (CWS) the community wide scheduling module.
  - b. For a referred visit the appointment date may be changed if rescheduled rather than canceling
  - c. If the visit is not rescheduled and the appointment was cancelled for a referred visit, or no treatments were rendered for the month's V# for a recurring visit, the ancillary department should notify the Admitting department to cancel the visit. This is done after assuring that not treatment was rendered, no documentation exists and no charges were rendered.
  
3. Dedicated Authorization Group
  - a. Contact the insurer or certification agent and notify of cancellation or rescheduled appointment/service date.
  
4. Billing/Collection
  - a. There are times when procedures will not be performed for various reasons and need to be cancelled however, the patient has had some services performed (lab tests, rad tests etc.). These charges will remain on the visit # and are to be billed by PFS.