SCHOOL OF MEDICINE
DEPARTMENT OF OBSTETRICS & GYNECOLOGY

STANDARD OPERATING PROCEDURE-POLICY

Delinquent Documentation

SCOPE/APPLICABILITY:
This SOP defines the different types of delinquent documentation and describes the processes for follow up on each. It applies to the staff and clinical faculty of the Department of Obstetrics and Gynecology.

PURPOSE:
This SOP will provide guidance to Department of Obstetrics and Gynecology staff on how to follow up on the various types of delinquent documentation. It will also ensure fair and consistent treatment of the clinical providers in the department.

DEFINITIONS:
Delinquent Medical Records: Report compiled by and sent out weekly from UH Health Information Management which only reviews some note types.

HIM Outpatient Documentation: Report compiled by and sent out weekly from UH Health Information Management that includes all outstanding outpatient notes and includes all note types.

Pending Report: Report compiled by and sent out weekly from UNM Medical Group Coding that includes all outstanding inpatient documentation not included in the Delinquent Medical Records report.

PROCEDURE:

Delinquent Medical Records process

1. Department staff receives weekly list by email from HIM near the end of the day on second business day of the week.
2. Department staff checks each encounter the following day before sending out notices and removes any that were finished overnight.
3. Department staff sends out reminders as follows:
    a. A normal urgency-level reminder goes out to the provider about any items not in red, as they have discharge dates 3-18 days past.
    b. A high-urgency-level reminder goes out to the provider, their supervisor and the Vice Chair of Clinical about any items in red, as they have discharge dates 19 or more days past.
4. When a provider is about to have Cerner access cut, HIM notifies IT, Department Administrator, Department Chair, and CMO or designee. They also send a TigerText or call the clinician. Please refer to UNMH Delinquent Documentation Process v10-Flowsheet.pdf

Notes:

- For extenuating circumstances, the Sr Med Practice Specialist can request an extension from HIM. One example of this is extended leave.
- For encounters involving both an attending and a resident, a separate reminder will be sent to both for that one encounter.

HIM Documentation report process

1. HIM-Outpatient-Coding@salud.unm.edu sends a weekly list of outpatient encounters awaiting documentation that are less than 90 days old. After 90 days the encounters come off this list because they have passed the timely filing deadlines at that point.
2. Department staff checks each encounter in PowerChart and notes whether it is complete or needs follow up.
3. Sr Med Practice Specialist reviews complete list and submits to HIM-Outpatient-Coding.
4. Department staff sends normal-level urgency notices to providers, except those that have received at least one request or need special attention
    a. The Sr Med Practice Specialist sends all requests that have not received a response one previous time and copies the Division Chief.
    b. The Sr Med Practice Specialist sends all requests that have not received a response two previous times and copies the Vice Chair of Clinical and Department Chair.
5. The Med Practice Specialist sends the completed list to HIM-Outpatient-Coding as well as a list of any encounters that should come off the department's list (e.g. Nurse Visits)
    a. This list is due to HIM-Outpatient-Coding by 11 am on Wednesday if possible but no later than Thursday at 11 am if updates are to be made by the next list distribution.

Pending Report process

1. A list of inpatient encounters pending documentation comes from UNMMG Coding to the Sr Med Practice Specialist on the second business day of the week.
2. Department staff looks up each encounter in PowerChart to see if it still needs a response.
3. Department staff sends normal-level urgency notices to providers, except those that have already received at least one request or need special attention
    a. The Sr Med Practice Specialist sends all requests that have not received a response one previous time and copies the Division Chief.
    b. The Sr Med Practice Specialist sends all requests that have not received a response two previous times and copies the Vice Chair of Clinical and the Department Chair.

Chronic Delinquent Documentation

Once all the above processes have been exhausted and documentation remains delinquent, or if a clinical provider falls into a pattern of leaving documentation unfinished, the Division Chief,

Vice Chair of Clinical Operations and Department Chair may consider whether an FPPE is an appropriate measure.

"Documentation of routine inpatient or observation status clinical encounters shall be completed in a timely manner, preferably immediately following the provision of care, but no later than 24 hours after the inpatient or observation status clinical encounter. This includes completion of both the dictated or written clinical entry and any relevant billing. Documentation of routine outpatient clinical encounters shall be completed in a timely manner, preferably immediately following the provision of care, but no later than 72 hours after the outpatient clinical encounter. This includes completion of both the dictated or written clinical entry and any relevant billing." (UNM Hospitals Documentation of Clinical Activities by UNM Hospitals Medical Staff and House Staff, 1.c. and 1.d.)

"Clinical department service chiefs will utilize departmental administrative policy and procedure to encourage timely provider completion of all delinquent medical record elements. Should a provider exhibit frequent or high volume medical record delinquencies in spite of maximal utilization of departmental administrative means to encourage completion, the department clinical service chief may refer the matter to the medical staff through the ADCA or the COS for consideration of further medical staff professional review and corrective action, which may include a recommended focused professional practice review for timely completion of medical documentation, or up to referral for consideration of administrative suspension as per the UNMH Medical Staff Bylaws." (UNM Hospitals Documentation of Clinical Activities by UNM Hospitals Medical Staff and House Staff, 8.f. and 8.g.)

Extended Absences

When a clinical provider takes an extended leave, they will meet with their Division Chief beforehand to devise a plan. This plan should include expectations for handling delinquent documentation that surfaces while they are out, taking into account the circumstances of that individual's leave. Either the Division Chief or the individual should notify the Sr. Medical Practice Specialist about the plan and their expected role in the implementation.

Clinician Exiting the Department/University

When a clinical provider exits the department and the university, they will complete all documentation of which they are aware as of the final day of their employment. University policy does not allow access to any clinical applications beyond the final day of employment. If the department becomes aware of incomplete documentation after the final day of a clinician's employment, it will be the Division Chief's responsibility to administratively complete that documentation.

SCHOOL OF MEDICINE
DEPARTMENT OF OBSTETRICS & GYNECOLOGY

APPROVALS:

SOP Owner:	Clinical Vice Chair	Date: 11/6/2023
Chair Approval:		Date: 11/8/23
Effective Date:	11/8/23	