

TriWest's Telephonic Inpatient Admission, Discharge Planning Process for Medical/Surgical Cases

TriWest Utilization Management (UM) clinicians are required by TRICARE Management Activity (TMA) to monitor utilization of services by beneficiaries in facilities, including Acute Inpatient Care facilities, Skilled Nursing Facilities (SNFs), Long Term Care Acute Care (LTACs) or Acute Rehabilitation (Rehab) facilities in TRICARE's West Region. TriWest will conduct telephonic continued stay reviews for beneficiaries treated in sole community hospitals (non-DRG) and patients in SNF, LTAC and Rehab facilities. Inpatient utilization monitoring in DRG facilities will be limited to focusing on certain high risk conditions and long stays or outliers. TriWest will continue to evaluate utilization data and change prospective and continued stay telephonic review requirements from time to time. Any future changes to these processes will be communicated to providers in E-Newsletters and on www.triwest.com/provider.

TriWest UM clinicians are available to assist in discharge planning. You can contact TriWest UM clinicians at 1-888-TRIWEST (1-888-874-9378) with any questions, to submit responses to requested clinical updates, and to request assistance with discharge planning.

All admission face sheets for medical/surgical patients must be faxed to 1-866-269-5892. Please do not submit lists of patients as lists do not provide the required information. In order to process care requests for approval of additional days, medical records for continued stay review are needed.

Documentation needed for medical/surgical admission reviews include:

- Brief history to include age, sex, admission type (e.g., elective, emergency department, etc.)
- Patient demographic information
- Reason for admission
- Co-morbidities
- If InterQual criteria were applied justifying admission, provide applicable category and subset. If other criteria were applied, provide similar information.
- Anticipated length of stay; if patient has already been discharged, provide the date of discharge and the place to which the patient has been discharged.
- Anticipated discharge planning needs (e.g., home care, DME, consults, infusion, transfer to another facility)
- Hospital point of contact (name, phone number, fax number) and the same information for contacting the patient's point of contact.

Necessary documentation for medical/surgical continued stay review includes:

- Relevant changes in condition (e.g., changes in condition that cause a change in care needs, procedures, diagnostic testing, medications, changes in diagnosis or added diagnosis, and transfer from one level of care to another)
- Discharge planning needs; i.e. home care needs, DME requirements, consultation needs, outpatient infusion, transfer assistance.
- Hospital point of contact including name, phone number, fax number and the patient's point of contact information)
- Anticipated discharge date
- Treatment plan

If you have any questions regarding this process or if you need assistance with discharge planning, please call TriWest at 1-888-TRIWEST (1-888-874-9378).



TriWest Healthcare Alliance provides access to quality health care for 2.7 million members of America's military family in the 21-state TRICARE West Region.