Outpatient Medical Record Completion Policy
Effective Date: 3/16/2016

I: Purpose
To define the expectations for completion of outpatient clinic notes for Department of Pediatrics providers. This policy brings the Department of Pediatrics into alignment with the policy for the University of Utah Hospital and Clinics.

II: Policy
A complete outpatient clinic note should include the patient’s history, physical examination, and all information necessary to support a well-informed assessment and recommendations.
In the interest of high value patient care, patient safety, collegiality with other providers involved in a patient’s care, and business operations, Department of Pediatrics providers are strongly encouraged to complete their clinic notes within 7 days of the appointment. Understanding that circumstances may arise that interfere with timely note completion, we allow an additional 7 day grace period. Notes must be completed and finalized in the electronic medical record by the 14th following the date the patient was evaluated in clinic.

A. The day that the patient is seen in clinic is noted as day 1.
B. On the 8th day following the clinic appointment, providers will be notified by University Medical Billing (UMB) of any records that are incomplete. The provider will be given an additional 6 days to complete these notes.
C. On the 15th day following the clinic appointment, providers and their Division Chief will be notified by University Medical Billing (UMB) of any records that are incomplete. The provider will be warned that notes that are incomplete at 21 days after the appointment will result in a Strike.
D. Notes that are incomplete on the 22nd day following the appointment will be counted as delinquent (Strike one).
   • Notes for any particular clinic date will be counted as a group.
      a. For example – 3 notes that are incomplete 21 days following a provider’s clinic will be counted as one Strike.
E. Providers who incur a Strike will be notified by UMB that failure to complete all record deficiencies by the 28th day will result in a second delinquency (Strike two).
F. Each additional seven-day period in which all record deficiencies are not completed will result in an additional delinquency (Strike three).
G. Providers who incur three Strikes during the fiscal year will be required to present a written plan to their division chief and the Vice Chair of the Department explaining why their notes are incomplete and their plan for correcting the problem.
H. Providers who incur a fourth Strike during a fiscal year will be required to appear before a group of Ambulatory Division Chiefs to explain why their notes are incomplete and their plan for correcting the problem.

I. Providers who incur a fifth Strike during a fiscal year will be required to meet with the Department Chair for discussion of potential withholding of CIP, a reduction in FTE or suspension of clinical privileges.

J. Exceptions to these policies will be made by the Division Chief in collaboration with the Vice Chair of the Department for significant illness or other exceptional circumstances.

K. Vacation and other absences of greater than 14 days require completion of medical records prior to leaving.

L. Records unavailable for completion for reasons beyond the provider’s control will not be counted as being delinquent.

M. Providers must complete all medical record delinquencies upon termination of employment with University Health Care. A provider’s final paycheck may be held pending completion of all delinquent medical records.