HUSCH BLACKWELL

Documentation Order List and Tips for Organizing Patient-Specific Records

The following documentation order list provides a framework for how to effectively organize patient-specific records for submission. The listed documents are examples of the types of documents that tend to be included in record requests and are shown here to provide organizational guidance. It is critical to ensure that your submission is based on and includes all of the documentation types that are provided in the record request letter from the auditor.

When organizing documentation for a patient's record submission, please note the following:

- Include only the records requested. This may vary depending on your specific request so be sure to discuss with Husch Blackwell what is requested by the auditor.
- Segregate records by category and place in the order in the table below. If scanning records, place
 title pages between each category of documents (e.g., Patient Related Notices and Authorizations;
 Initial Certifications and Recertifications).
- Arrange documents in chronological order.
 - o If possible, have all disciplines integrated and then put in chronological order (e.g., April 1, 2012 nursing note, April 4, 2012 social work note, April 6, 2012 chaplain note).
 - o If the above is not workable, organize information subcategories (*e.g.*, nursing notes, Hospice Interdisciplinary Plans of Care, etc.) in chronological order from oldest to most recent.
 - For example, arrange the nursing notes for Patient D so that the earliest date to be included in the record submission—January 1, 2011—would appear first, and the latest date to be included in the record submission— February 28, 2011—would appear at the end.
 - In order to arrange the records chronologically, if scanning the documents, be sure they are not scanned in reverse chronological order.
- If any documents are double-sided, be sure that both sides of the document are scanned.
- If any documents include post-it notes, be sure that all information will be visible when scanned.
- Do not include erroneous pages, such as blank pages, fax cover sheets, etc.
- Do not alter, include notes on, write on, erase/remove information from, or otherwise change the documentation.

Sample Documentation Order List

Category	General Order of Documentation - Based on Example Document Types [Refer to record request letter and your patient records to ensure that all requested documentation is included with the submission.]
Patient Notices and	Election Statement
Authorizations	Consent for Treatment (if different than Floation)
	Consent for Treatment (if different than Election)
	Authorization of Benefits (if different than Election)
	Signed HIPAA Privacy Notification Forms
2. Initial Certification and Recertification for Dates Requested	Initial Certification from Hospice Physician and Attending Physician
	Recertification(s)
	Face-to-Face Visit Documentation (if applicable)
3. Admission Documentation	Hospice Referral Form
	Admission Notes
	History and Physical
	Hospital Discharge Summary, if applicable
	Comprehensive Assessment
4. Interdisciplinary Team Plan of Care and Notes	Hospice Interdisciplinary Plan of Care
	Therapy evaluations and plans of care
	Interdisciplinary Team Meeting Notes
5. Progress Notes	Nursing Notes
	Hospice Aide Notes
	Medical Social Worker Notes

Category	General Order of Documentation - Based on Example Document Types [Refer to record request letter and your patient records to ensure
	that all requested documentation is included with the submission.]
	Chaplain Notes
	Physician Notes
	Nurse Practitioner Notes (if any)
	Volunteer Notes
	Therapy Notes
	- Physical
	- Occupational
	- Speech-language
	Dietician Notes
6. Orders	Physician Orders (including DNRs)
7. Medication List	Medication List
8. Inpatient Medical Record	General Inpatient and/or Respite Care Records
9. Laboratory and Diagnostic Reports	Laboratory Reports (if any)
·	Any diagnostic testing reports
10. Discharge Documentation	Discharge Notes
	Hospice Termination/Revocation Documentation
	Notice of Medicare Non-Coverage, if any
11. Other	Current beneficiary contact information, if applicable
	Copy of claim, if available

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