

PHC Care Transitions Program

Patient Screening Form

Name of Patient:	DOB:	Age:
Hospital of index admission:	Da	ate of Admission:
Admission diagnosis:	Da	ate of Discharge:
Primary Care Provider:	Date of sci	eening evaluation:

Requirements (all of the following must be true):

- ____ Adult age 18 or over
- _____ Patient currently eligible for PHC coverage

_____ Patient with Medi-Cal only, no Medicare AND not capitated to a hospital (includes "special member" status).

_____ Not enrolled in home visiting NP program or IOPCM.

_____ Not being discharged to Hospice, or an intensive pre-hospice palliative care program (for example: Sutter's AIM program)

_____ Expected discharge disposition within the service area of the Care Transition program.

Four Scoring domains:

<u>Section A</u> can be completed with basic admission information, and may be conducted by a Utilization Management Nurse.

<u>Section B</u> requires access to the Admission History and Physical (although some areas may be more complete on conversation with patient)

<u>Section C</u> is available in an Electronic Medical Record. If no EMR is available, this may require patient interview.

<u>Section D</u> generally requires patient interview or review of social worker/discharge planner notes. **Minimum score needed to enroll in program: 8+ points in Section A, or 20+ points in sections A through D.**

A. Basic Hospitalization Data:

a. Age

b.

с.

rige			
i.	Age 80+		3 points
ii.	Age 65-79		2 points
iii.	Age 50-64		1 point
Acute M	Medical Conditions on index admiss	sion	
i.	CHF exacerbation		5 points
ii.	Sepsis		3 points
iii.	Acute MI/unstable angina		2 points
iv.	Pneumonia, GI bleed, COPD exact	erbation	2 points
Length	of stay on this admission (so far)		
i.	5-7 days		1 point
ii.	8-14 days		2 points
iii.	15+ days		3 points
		Subtotal A:	

Patien	t Name:	DOB: Date	e of Eval:	
			Subtotal A:	
В	Medica	l Record Review	From prior page	
Б.	a.		rioni prior puge	
		i. ESRD or Stage IV CKD or severe ARF	4 points	
		ii. COPD, Chronic Liver dz, metastatic CA,		ch
		iii. Diabetes Mellitus, CVA with residual def		
	b.	Number of Outpatient Medications: (Inclu-		
		i. 6-10 (NOTE: if using inpatient med		point
		ii. 11-16 subtract 2 meds to esti		points
		iii. 17+ number of outpatient		ooints
	с.	Problem medications:	_	
		i. Warfarin, other anticoagulant (except AS	A alone) 1 point	
		ii. Insulin	1 point	
		iii. Digoxin	1 point	
		iv. Other new cardiac medications	1 point	
	d.	Functional status		
		i. Wheel chair bound	2 points	
		ii. Other ambulation impairment	1 point	
		iii. Severe hearing or vision impairment	1 point	0 1 4 4 1
	e.	Mental Health/substance use diagnosis/neuro	2	Subtotals
		i. Schizophrenia/Bipolar disorder	3 points	A:
		ii. Depression/anxiety	1 point	B: C:
		iii. Chronic painiv. Heavy alcohol use	1 point 3 points	D:
		v. Active other substance abuse	2 point	Total:
		vi. Moderate to severe dementia	2 point 1 point	10tai
		vi. Woderate to severe dementia	Subtotal B:	
C.	Recent	patient history		_
		Prior readmission (within 30 days of discharge)		
		i. This hospitalization is a readmission	5 points	
	b.	Other Hospitalizations in past 6 months (excludin	ng any readmission)	
		i. Each hospitalization	2 points ea	ch
	c.	ED visits in last 6 months: (Total:)		
		i. >5	3 points	
		ii. 3-5	2 points	
P	. .		Subtotal C:	_
D.		nmental characteristics (Based on Visit to Patient/H	Hospital)	
	a.	Family support system i. Homeless or unstable housing	6 points	
		i. Lives alone at home	6 points 3 points	
		iii. Caregiver with limited capacity	3 points	
		iv. Discharged to SNF for reconditioning	2 points	
		v. Limited nearby family/friends	2 points	
		vi. Other undefined psychosocial risk factor		
	b.	Health Literacy	5 points	
		i. Very low health literacy	3 points	
	c.	Quality of baseline hospital to PCP handoff (Prot		
		i. PCP rounded on patient in hospital	1 points	
		ii. Excellent PCP communication with hosp	italist1 points	
	d.	Advanced Care planning before enrollment (Prot	-	
		i. POLST indicates comfort care only	2 points	
		-	Subtotal D:	