



**Ambulatory Clinic Policy and Procedure**

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|-----------------------|--|--------------------|---------------|
| Title:                | <b>Termination of a Physician and Patient Relationship</b>                     | Policy Number:     | <b>8.11</b>   |
|                       |  | Version Number:    | <b>9</b>      |
| Regulation Reference: | <b>Reasonable Practice Standards and Texas Case Law, <i>King V. Fisher</i></b> | Effective Date:    | <b>2/2016</b> |
|                       |  | Original Approval: | <b>3/1996</b> |

**POLICY STATEMENT:**

It is the policy of Texas Tech University Health Sciences Center (TTUHSC) Ambulatory Clinics to maintain a cooperative and trusting provider-patient relationship with its patients. When a provider-patient relationship is no longer proceeding in a mutually productive manner, it is the policy of TTUHSC to terminate the provider-patient relationship within the bounds of applicable state and federal laws, rules, and regulations.

**SCOPE:**

This policy applies to all TTUHSC Ambulatory clinics operated through its Schools.

**PROCEDURE:**

1. The termination process must be initiated by an attending/faculty provider. Staff or residents may give input into the process but it remains up to the discretion of an attending/faculty provider to make the final decision. If a provider declines to treat an established patient with the intent to permanently terminate the relationship, a termination letter must be sent.
2. The degree of involvement by the Professional Liability office in the termination process is left to the discretion of each involved campus. Professional Liability should be contacted by staff that are unfamiliar with the process or need additional information.
3. Professional Liability should always be consulted prior to termination of a pregnant patient.
4. Clinical staff should verify that:
5. The termination letter includes reasonable notice to the patient, (at least 30 days from receipt of the notice, except in extreme circumstances involving threats of violence), affording the patient an opportunity to find other medical care and is signed by an attending/faculty provider. See [8.11.A, Sample Patient Termination Letter \(English\)](#) or [8.11.C, Sample Patient Termination Letter \(Spanish\)](#).
6. The medical record documentation supports the decision for termination; however, the letter to the patient does not have to give a specific reason for the dismissal. See [8.11.A, Sample Patient Termination Letter \(English\)](#) or [8.11.C, Sample Patient Termination Letter \(Spanish\)](#).
7. The department chairperson has been made aware of the planned termination before notice is sent to the patient.
8. If the termination of the relationship is first initiated by the patient, then a confirmation letter should be sent instead of the termination letter to document the patient’s decision to end the relationship or transfer care. See [8.11.B, Sample Confirmation Letter of Patient Decision to Transfer or Terminate Care \(English\)](#) or [8.11.D, Sample Confirmation Letter of Patient Decision to Transfer or Terminate Care \(Spanish\)](#).
9. Clinic personnel or departments, should confirm that:
  - a. A copy of the termination letter is in the patient’s medical record;
  - b. Documentation of the action is maintained in the IDX system;

- c. The termination letter is sent by both certified mail, return receipt requested and regular mail and once returned, the receipt is kept in the medical record;
  - d. If the patient is in a managed care plan and the terminating provider is the primary care provider, the plan is notified that the patient will need to select a new primary care provider.
10. Prior to scheduling a new patient, clinic staff should access the patient registration system to determine whether the patient has been terminated from care in another clinic. If the patient has been terminated, scheduling the appointment should be postponed while the provider with whom the appointment is to be made is contacted for an opportunity to review the medical record. The provider may then make a determination as to whether the patient will be accepted for care in that clinic.
  11. If the patient is not accepted, clinic staff will contact the patient regarding previous termination status and should process the additional clinic termination/exclusion from care in the patient registration system.
  12. After termination or exclusion from two clinics, the patient registration system will indicate the multiple terminations. Under certain circumstances (violent behavior) TTUHSC Ambulatory Clinics, in consultation with Professional Liability, may terminate/exclude the patient from care in all clinics.
 

\*Note: In the above scenario, if a patient has a current and active patient/provider relationship in more than one of the TTUHSC clinics and is terminated from one, the patient can only be terminated from the other clinics at the treating provider's direction and with notice.
  13. A patient's request to re-establish care, once they have been terminated, will be considered on a case-by-case basis and left to the discretion of the department chair in consultation with the attending provider.
  14. Terminated patients that present for care in the hospital including the emergency room cannot be refused care as TTUHSC providers have contractual obligation to the affiliated hospital to provide needed services. The provider may also be required to provide care under the Emergency Medical Treatment and Active Labor Act or other laws governing emergency care of the patient. Once the hospital episode of care is completed and any required outpatient follow-up is provided, the patient remains a terminated patient from that clinic. (Caution: Clinic staff must be alerted to allow scheduling of terminated patients for the follow-up appointment.)

**APPROVAL AUTHORITY:**

This policy shall be recommended for approval by the Joint Ambulatory Policy Committee to the Council of Deans.

**RESPONSIBILITY AND REVISIONS:**

It is the responsibility of the Joint Ambulatory Policy Committee to review and initiate necessary revisions based on collaboration and input by and through Quality Improvement/Performance Improvement, Risk Management and the Office of Institutional Compliance.

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**RIGHT TO CHANGE POLICY:**

TTUHSC reserves the right to interpret, change, modify, amend or rescind this policy in whole or in part at any time to reflect changes in policy and/or law.

**CERTIFICATION:**

This policy was approved by the Council of Deans on February 4, 2016.

**ATTACHMENTS:**

[8.11.A – Sample Patient Termination Letter \(English\)](#)

[8.11.B – Sample Confirmation Letter of Patient Decision to Transfer or Terminate Care \(English\)](#)

[8.11.C – Sample Patient Termination Letter \(Spanish\)](#)

[8.11.D – Sample Confirmation Letter of Patient Decision to Transfer or Terminate Care \(Spanish\)](#)