

### **Proper Termination of Patients**

It may become necessary to end patient relationships that are no longer therapeutic or appropriate based on patient behaviors. It is critical, however, that the provider end the relationship in a manner that will not lead to claims of discrimination or abandonment.

### **Steps for Withdrawing Care**

Establish a written policy and procedure with a standardized process that addresses interventions prior to ending the relationship and the steps to take if it becomes necessary to dismiss the patient. Ensure that approvals for any patient dismissal go through practice leadership and the assigned provider. Some offices may consider dismissing a patient from the entire practice. This avoids an on-call situation that might require the practitioner who ended the relationship to treat the patient.

When the situation for dismissing the patient is appropriate, provide a formal written notice stating that you are withdrawing care and requiring the patient to find another practitioner. Mail the written notice to the patient by certified mail with a return receipt requested.

Keep copies in the patient's medical record of all the materials: the letter, the original certified mail receipt (showing that the letter was sent), and the original certified mail return receipt (even if the patient refuses to sign for the certified letter).

### **Elements of the Written Notice**

Include the following information in the written notice:

**Reason:** Although stating a specific reason for ending the relationship is not required, it is acceptable to use the catchall phrase "inability to achieve or maintain rapport," state that "the therapeutic provider-patient relationship no longer exists," or assert that "the trust necessary to support the relationship no longer exists." If the reason for ending the relationship is patient noncompliance/nonadherence, that may be stated as well, along with your attempts to obtain patient compliance.

**Effective date:** The effective date for ending the relationship should provide the patient with a reasonable amount of time to establish a relationship with another practitioner. Although 30 days from the date of the written notice is usually considered adequate, follow your state regulations.

**Interim care provisions:** Offer interim emergency care prior to the effective date. For emergency situations that cannot be handled in the office, refer the patient to an emergency department or instruct the patient to call 911.

**Continued care provisions:** Offer referral suggestions for continued care through medical or dental societies, nearby hospital referral services, community resources, or the patient's health plan network. Do not recommend another healthcare provider specifically by name.

**Patient records:** Offer to provide a copy of the office record to the new practitioner by enclosing a HIPAA-compliant authorization (to be returned to the office with the name and address of the new practitioner and the patient's signature). One exception is a psychiatric record, which may be offered as a summary in many jurisdictions *in lieu* of a full copy of the medical record.

**Transition of care:** Indicate your willingness to speak with the patient's new provider to help ensure a smooth transition.

**Patient responsibility:** Specify that the patient is personally responsible for all follow-up and for continued medical or dental care.

**Medication refills:** Explain that medications will be provided only up to the effective date that the relationship ends.

\*These are helpful suggested guidelines and do not constitute legal advice, and do not ensure a successful outcome. The ultimate decision regarding the appropriateness of any treatment must be made by each healthcare provider considering the circumstances of the individual situation and in accordance with the laws of the jurisdiction in which the care is rendered.