



Care of the Surgical Patient

LOB(s): <input checked="" type="checkbox"/> Commercial <input checked="" type="checkbox"/> Medicare <input checked="" type="checkbox"/> Medicaid	State(s): <input checked="" type="checkbox"/> Idaho <input checked="" type="checkbox"/> Montana <input checked="" type="checkbox"/> Oregon <input checked="" type="checkbox"/> Washington <input type="checkbox"/> Other: <input checked="" type="checkbox"/> Oregon <input type="checkbox"/> Washington
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Enterprise Policy

PacificSource is committed to assessing and applying current regulatory standards, widely-used treatment guidelines, and evidenced-based clinical literature when developing clinical criteria for coverage determination. Each policy contains a list of sources (references) that serves as the summary of evidence used in the development and adoption of the criteria. The evidence was considered to ensure the criteria provide clinical benefits that promote patient safety and/or access to appropriate care. Each clinical policy is reviewed, updated as needed, and readopted, at least annually, to reflect changes in regulation, new evidence, and advancements in healthcare.

Clinical Guidelines are written when necessary to provide guidance to providers and members in order to outline and clarify coverage criteria in accordance with the terms of the Member's policy. This Clinical Guideline only applies to PacificSource Health Plans, PacificSource Community Health Plans, and PacificSource Community Solutions in Idaho, Montana, Oregon, and Washington. Because of the changing nature of medicine, this list is subject to revision and update without notice. This document is designed for informational purposes only and is not an authorization or contract. Coverage determinations are made on a case-by-case basis and subject to the terms, conditions, limitations, and exclusions of the Member's policy. Member policies differ in benefits and to the extent a conflict exists between the Clinical Guideline and the Member's policy, the Member's policy language shall control. Clinical Guidelines do not constitute medical advice nor guarantee coverage.

Background

Quality health care and accurate billing is based on rigorous and complete clinical documentation in the medical record. Complete and clear documentation is critical to timely review for reimbursement of services. PacificSource requires sufficient documentation of surgical services to meet regulatory compliance and to promote best practice guidelines.

In caring for a surgical patient, the attending surgeon is responsible for evaluation and management in the pre-operative thru post-operative periods. When an alternate or non-physician, licensed health care professional is involved in the care of the surgical patient, the surgeon needs to ensure it is based on the patient's best interest. All providers will follow specific scope of practice requirements determined by regulations, including those of the governing boards of the applicable licensees.

This policy is intended to cover the basic assessment and documentation requirements for surgical procedures. Additional requirements may be needed per treatment specific PacificSource policies, procedures, criteria-based guidelines, and regulatory requirements.

Criteria

Commercial

I. Pre-Operative Assessment

PacificSource recognizes that evaluation, diagnosis, and care of the surgical patient is the responsibility of the surgeon. When an alternate operating surgeon or procedural provider is to be used during an elective or non-emergent surgery, documentation of independent examination and diagnosis must accompany the prior authorization request. Urgent and emergency surgery documentation will not require the independent assessment due to clinical presentation.

A. Elective and Non-emergent Surgery

PacificSource requires the patient's surgeon to complete a face-to-face or telehealth pre-operative assessment appropriate to the procedure, prior to the day of surgery. In the case of an alternate operating surgeon or co-management of procedure, a pre-operative assessment is required to be completed by **EACH** provider and shall include the following documentation:

1. Updated medical record entry documenting any change in patient condition since most recent documented medical history and physical, including allergies to drugs and other biologicals
2. Review of patient history and physical examination
3. Development of independent diagnosis of the condition requiring surgery by the surgeon(s)
4. Discussion of the surgical procedure, alternatives, risks, and questions
5. Physician will examine the patient immediately before surgery to evaluate the risk of anesthesia and of the procedure for that patient. This must be completed by the surgeon immediately prior to surgery.

B. Urgent and Emergency Surgery

PacificSource recognizes surgery performed under urgent or emergency circumstances will not adhere to this policy's prior authorization documentation requirements due to clinical presentation.

II. Post-Operative

PacificSource recognizes it is the responsibility of the operating surgeon to assure safe and readily available post-operative care for each patient on whom he/she performs surgery. All services shall be provided within the scope of practice of the individual delivering service.

Medicaid

PacificSource Community Solutions follows Oregon Administrative Rule (OAR) 410-130-0380 and 410-151-0000 through 410-151-0003 for Care of the Surgical Patient.

Medicare

PacificSource Medicare follows this policy for Care of the Surgical Patient

Related Policies

Documentation Requirements for Health Practitioners

References

Care of the Surgical Patient. (April 2023). Oregon Medical Board.
<https://www.oregon.gov/omb/board/philosophy/Pages/Care-of-the-Surgical-Patient.aspx>

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Guidelines for Medical Record Documentation. (July 2018). NCQA. https://www.ncqa.org/wp-content/uploads/2018/07/20180110_Guidelines_Medical_Record_Documentation.pdf

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Appendix

Policy Number:

Effective: 10/1/2021

Next review: 9/1/2025

Policy type: Enterprise

Author(s):

Depts: Health Services

Applicable regulation(s): OAR 410-130-0380

Commercial Ops: 8/2024

Government Ops: 8/2024