

To: Rochester Regional Health MDS and Employees

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Subject: Updated RRH Homedraw Phlebotomy Guidelines & Required Provider Attestation

Date: December 28, 2020

As the COVID-19 pandemic continues, requests for in-home blood draws far exceed our capacity to provide this service. In order to prioritize these services for those in the greatest need, RRH Homedraw Phlebotomy Guidelines are being updated.

To ensure the safety of our staff, all homedraw requests for patients with **known or suspected COVID-19 illness during the isolation and/or quarantine period require pre-approval by a Lab Director**. Prior to placing a homedraw order, please call Homedraw Phlebotomy at 585-922-1160 to initiate this approval process.

In addition to the May 2020 RRH Homedraw Guidelines (reviewed below) ordering providers will now also need to **attest** that their homedraw orders are:

- Limited to patients with no reasonable means of transportation to a patient service center
 - Homedraws are not available as a convenience or concierge service
 - Homedraws are not available to patients able to access other services outside of their home (patient, family member or friend able to drive patient to a doctor's appointment, barber or salon appointment etc.)
 - If your patient responds "cancel" to their TeleVox notification for a next day scheduled homedraw <u>or</u> your patient is a "no-show" (not at home) for a scheduled homedraw, homedraws orders for this patient will be cancelled. If this happens:
 - Your office will be notified by both phone and FAX
 - You will need to speak with a Lab Director to reinstate homedraw services for your patient, and a same day STAT re-order will not be possible.
 - Please help your patients understand that we are no longer able to simply come back the next day if a scheduled homedraw appointment is declined or missed
- Limited to clinically necessary lab work that cannot be safely delayed
- Grouped with other homedraw requests whenever possible
 - o Ordering providers are responsible for reviewing all homedraw orders for their patient

- Please call Homedraw Services at 585-922-1160 to coordinate your orders with other lab draws scheduled for this patient
- Please coordinate home phlebotomy needs with homecare nursing visits whenever possible

Effective immediately, all new homedraw phlebotomy orders will require a provider attestation as outlined above. Over the next several weeks you will also be asked to review all existing homedraw orders- for each patient you will need to either attest that each patient meets updated RRH eligibility criteria or modify/cancel the existing homedraw orders.

All homedraw orders will be subject to audit review by service line, affiliate and division clinical leaders.

Our intent in restricting homedraw phlebotomy services is to be able to continue to meet the needs of our most frail and at-risk homebound patients, helping to effectively manage chronic conditions, reduce complications and prevent unnecessary ED visits and hospitalizations. Please manage the expectations of your patients who are not truly homebound, and encourage all such patients to utilize our patient services centers (PSC's) - with support for transportation from family and friends. Our PSC's are safe, conveniently located and well-prepared to meet your patients' needs. We appreciate your cooperation and understanding.

Review of May 2020 RRH Homedraw Guidelines

- Supported by RRH Executive, RRH Primary Care & Ambulatory Specialties Institute, (PCASI), RRH Surgery & Medical Specialties (SMS), Sands Constellation Heart Institute (SCHI), Lipson Cancer Institute, RRH Long Term Care (LTC) and GRIPA leadership.
- RRHL Homedraw Services will be available only to RRHL employed and community affiliated ordering providers (generally defined as active membership in one or more RRH medical staffs), practices, clinics and facilities (long term care etc.)
- Patients receiving homecare services- only if these services cannot be provided by homecare staff already caring for your patient
- Post-surgical patients for up to 6 weeks post-op- again, only if these needs cannot be met by already scheduled homecare staff
- Homebound anticoagulated patients who cannot be transitioned to non-warfarin alternatives must follow the guidelines below- PT/INR testing outside of these guidelines cannot be supported by homedraw services- please work with your staff to modify all existing standing homedraw orders accordingly:
 - Close PT/INR monitoring for the first few weeks after initiating warfarin therapy
 - Once PT/INR's have stabilized in a therapeutic range, PT/INR monitoring is generally needed only once every 4 weeks
 - Once PT/INR's have stabilized in a therapeutic range for three consecutive months, in selected patients PT/INR testing can be extended to 8 week intervals
- Patients requiring homedraws to support BHN, DSRIP and other RRH managed care initiatives
- With the exception of permanently homebound patients, eligibility is based on <u>current</u> clinical acuity and the above guidelines; we will not accept one-time homedraw orders scheduled to be drawn greater than 30 days from today
- All same day "STAT" requests <u>must</u> be limited to high acuity situations (results required for immediate clinical management and/or to avoid an emergency room visit) and require Laboratory Director approval
- To serve as many patients as possible, we do not provide homedraw fasting collections
- Patients are notified the night before (by TeleVox phone recording) of the approximate time their phlebotomist will arrive; in order to serve the most patients possible, requests for specific times of day for homedraw visits cannot be accommodated unless clinically warranted (e.g. gentamycin level)