

## Medical Group

IDENT	MG1
Type of Document	Policy
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Title of Owner	AVP, Community Practice
Title of Approving Official	VP, Practice Development
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**TITLE:** No Show and Cancellation Policy

**PURPOSE:** To document the system of identifying and tracking a patient who no-shows or cancels an appointment within the UVM Health Network Medical Group clinics.

**POLICY STATEMENT:** The goal is to improve the management of clinical schedules, while optimizing clinical volumes.

**PROCEDURE & DEFINITIONS:**

**Cancelled:** A patient is identified as cancelled if they notify the office of their absence prior to their scheduled appointment time.

The patient will be “cancelled” in the EHR at the time of patient contact. Clinic staff are responsible for offering to reschedule the patient in the EHR at the time of patient contact.

**No-Show:** A patient who does not show up for their scheduled appointment or a patient who calls to cancel after their scheduled appointment time will be considered a no-show for that appointment.

Patients who match this definition will be “no-showed” in the EHR at end of each session, or at the close of the business day for the afternoon session. Clinic staff is responsible for notifying the provider of the no-show. In the case of a referral, notification of the referring provider will occur through the referral management process.

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A late patient is someone who presents after more than 50% of their scheduled appointment. Of note, a patient will not be considered a no-show, or cancelled patient if they arrive late for their appointment. Clinic staff will make every effort to offer the following options in accordance with UVM Medical Group Practice Standards:

- Patient is informed of the clinic schedule and told when they can be seen.
- Patient may be seen for a portion of their appointment and rescheduled for the second portion (i.e.: initial 60 minute antenatal visit).
- Patient may be seen at the end of the clinic session.
- Patient may be offered another provider depending on availability.
- Patient may be rescheduled at a convenient time for the patient.

**Note Well:** Site and/or Health Care Service based addendums to this policy will be published with this policy. Any addendums must be approved utilizing the policy approval process by the Health Care Service Director and Director Clinical Operations and Training.

### MONITORING PLAN:

- Front Desk Lead/Supervisor will complete a quarterly observation of front desk staff to ensure appropriate status codes are being used.
- Front Desk Lead/Supervisor will review the no-show data in the EHR. If the no-show rate fluctuates >2% in any given quarter; site supervisor is responsible for drafting an action plan to be presented to AD/Director for review.

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### **Notifying Patients-**

#### **Established Patients:**

##### **1. First and Second No Show Appointment within 12 months:**

- Administrative or clinical staff will call the patient and inform him/her/they of the missed appointment and reschedule as appropriate.
- If there is no answer, a message will be left asking the patient to phone the clinic at his/her/they convenience to reschedule the appointment.
- If a message cannot be left on a voice mail system or telephone answering machine, a letter will be sent to the patient (First No Show Letter, Appendix A; Second/Third No Show Letter, Appendix B).
- Administrative or clinical staff will create a Telephone Encounter in EHR, with the reason for call as “No Show” and document the details surrounding the missed appointment or indicate that a message was left. If a message could not be left, document that a letter was sent.
- At the provider’s or other staff’s discretion, a patient may be referred to a clinic staff member to investigate why the patient has been unable to keep scheduled appointments, with the goal of developing a plan of action with the patient.
- Specialty practices should contact Health Team members in the patient’s Primary Care Medical Home when appropriate.

##### **2. Third No Show Appointment within 12 months:**

- Administrative or clinical staff will call the patient and inform him/her of the missed appointment and reschedule as appropriate.
- If there is no answer, a message will be left asking the patient to phone the clinic at their convenience to reschedule the appointment.
- Administrative or clinical staff will create a Telephone Encounter in EHR, with the reason for call as “No Show”, document the details surrounding the missed appointment or indicate that a message was left.
- Whoever created the Telephone Encounter under c. above, will forward the Telephone Encounter to the office supervisor.
- A letter will be sent to the patient, indicating this was a third no show appointment within 12 months (Second/Third No Show Letter, Appendix B).
- The office supervisor will communicate with the provider and investigate why the patient has been unable to show up for scheduled appointments, with the goal of developing a plan of action with the patient.

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- Specialty practices should contact Health Team members in the patient's Primary Care Medical Home when appropriate.

### **New Patients:**

**Primary Care:** In the case of a *new patient* who no shows for their initial primary care appointment, the front desk administrative staff will follow Step #1 of the above protocol. If the patient no shows for the new patient visit a second time, Step #1 will be followed again. If the patient calls to schedule a third visit, the front desk administrative staff will schedule the visit **and** notify the office supervisor who may elect to contact the patient in advance to discuss the likelihood of presenting for the visit and possible barriers to accessing care.

**Specialty Care:** In the case of a *new patient* who no shows for his/her new patient/consultation specialty care appointment, the front desk administrative staff will follow Step #1 of the above protocol. In addition, the referring provider will be notified of the no-show via a Telephone Encounter in EHR (or a letter if outside EHR). If the patient no shows for the new patient/consultation visit a second time, the front desk administrative staff will send a Telephone Encounter to the referring provider (or a letter if outside EHR) notifying them of the no-show, and the specialty provider's office will not contact the patient. If the patient calls requesting a visit a third time, the specialty provider's office will seek assistance of the referring provider's office to review the likelihood of the patient presenting for the visit. The specialty office supervisor may also opt to reach out to the patient to see what barriers may be preventing them from attending their appointment and involve the primary care community health team if necessary. A Telephone Encounter would be created and sent back to the referring office, and when appropriate, the referral would be closed.

\*\*For new patient visits, when the time lag between scheduling and appointment times is a couple of months or more, contacting the patient by phone or letter *one week* prior to their appointment may decrease the chance of no-showing.

Attachments: Appendix A and B (sample letters to send to patients)

**RELATED POLICIES:** N/A

**REFERENCES:** UVMHN Medical Group Practice Standards

**REVIEWERS and APPROVERS:** Community Practice Council

**OWNER:** Carrie Wulfman, AVP, UVMHNMG Community Practice