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**TO:** General Acute Care Hospitals  
Acute Psychiatric Hospitals  
Special Hospitals

**SUBJECT:** Hospital Discharge Planning Policies

**AUTHORITY:** Senate Bill (SB) 633 (Alquist, Chapter 472, Statutes of 2007)

This letter provides notification of written discharge planning policy and process requirements pursuant to Health and Safety Code (HSC) Section 1262.5.

Statutory Mandates

HSC § 1262.5 (a) requires each hospital to have a written discharge planning policy and process.

HSC § 1262.5 (b) requires the policy to include the hospitals obligation to make appropriate arrangements for post-hospital care, including but not limited to, care at home, in a skilled nursing or intermediate care facility, or from a hospice, prior to discharge. In addition, if the hospital determines that the patient and family members or interested persons need to be counseled to prepare them for post-hospital care, the hospital must provide for that counseling.

HSC § 1262.5 (c) states that the process required by HSC § 1262.5 (a) shall require that the patient be informed, orally or in writing, of the continuing health care requirements following discharge from the hospital. If the patient is unable to make decisions for himself or herself, the right to information regarding continuing health care requirements following discharge shall apply to the person who has legal responsibility to make decisions regarding medical care on behalf of the patient. Further, the patient may request that friends or family members also be given this information, even if the patient is able to make his or her own decisions regarding medical care.

HSC § 1262.5 (d) requires that a transfer summary be signed by the physician and accompany the patient upon transfer to a skilled nursing or intermediate care facility or to the distinct part-skilled nursing or intermediate care service unit of the hospital. A copy of the transfer summary must also be given to the patient and the patient's legal representative, if any, prior to the transfer.

The transfer summary must include essential information relative to:

- Patient's diagnosis
- Hospital course
- Pain treatment and management
- Medications
- Treatments
- Dietary requirement
- Rehabilitation potential
- Known allergies
- Treatment plan

In addition, a hospital must establish and implement a written policy to ensure that each patient receives, at the time of discharge, information regarding each medication dispensed (HSC § 1262.5 (e)).

A hospital shall provide every patient anticipated to be in need of long-term care at the time of discharge, with contact information for at least one public or nonprofit agency or organization dedicated to providing information or referral services relating to community-based long-term care options (HSC § 1262.5 (f)).

Finally, HSC 1262.5 (g) declares that a contract between a general acute care hospital and a health care service plan (issued, amended, renewed, or delivered on or after January 1, 2002), may not contain a provision that prohibits or restricts any health care facility's compliance with the requirements of HSC § 1262.5.

The information in this All Facilities Letter is a summary of SB 633 and HSC § 1262.5. Facilities are responsible for following all applicable laws. California Department of Public Health's failure to expressly notify facilities of legislative changes does not relieve facilities of their responsibility for following all laws and for being aware of all legislative changes. Facilities should refer to the full text of SB 633 and HSC § 1262.5 to ensure compliance.

Sincerely,

**Original Signed by Kathleen Billingsley, R.N.**

Kathleen Billingsley, R.N.  
Deputy Director  
Center for Health Care Quality