

DEPARTMENT OF HEALTH SERVICES
COUNTY OF LOS ANGELES**SUBJECT:** "FAST TRACK" ADMISSION AND VISIT POLICY**POLICY NO.** 586

PURPOSE:: To ensure compliance with the Board of Supervisors' order for implementation tracking and fiscal monitoring of utilization of the patient-specific Fast Track standard agreements for admissions and visits to County hospitals.

POLICY:: The Director, or his designee (hereinafter "Director") may, when it is in the best interest of the County, negotiate patient-specific per diem rates and/or percent of charges, and/or case rates for the provision of inpatient services, and/or percent of charges and/or per visit rates for the provision of outpatient services to patients who do not have an existing contract with the County for the provision of health care services by County facilities; and enter into standard Fast Track agreements with private payers (i.e., government agencies, private Health Maintenance Organizations (HMOs), Preferred Provider Organizations (PPOs), indemnity insurance plans, and self-pay patients) to admit and/or treat their patients at any County hospital

In considering and approving such agreements, the Director shall comply with the Board of Supervisors' administrative procedural directives to ensure that:

1. Each County hospital designates at least one County employee to sign each Fast Track agreement for inpatient and/or outpatient services.
2. All applicable blank spaces on each Fast Track agreement are completed and the agreement form signed by all parties prior to treatment or discharge.
3. Negotiated inpatient payment rates and not less than the higher of the County's inpatient Medi-Cal per diem contract rate than in effect, OR the applicable County hospital's estimated average variable cost for the applicable admission, and negotiated outpatient payment rates are not less than the applicable County hospital's estimated average variable cost for the applicable outpatient services.
4. County hospitals continue to bill the private payers the applicable Board-approved charges, notwithstanding the negotiated payment rates.
5. Each County hospital tracks and monitors all patients served pursuant to Fast Track agreements for inpatient and/or outpatient services and provides all data deemed necessary by the Director (i.e., patient statistics, revenue generated, etc.).

GUIDE:: Each County hospital shall submit a monthly report to the Director that includes the number of patients treated, the estimated cost of the services rendered, and the amount of revenue generated for both inpatient and outpatient services. The Director will submit a status report to the Board of Supervisors at the end of each

calendar year. Cost data will be analyzed on at least a yearly basis. The Department shall submit a status report to the Board of Supervisors at the end of each calendar year.

AUTHORITY:: Board of Supervisors Order, August 13, 2002

EFFECTIVE DATE: Aug 13, 2002

SUPERCEDES: 11/16/1999

APPROVED: Signature on File
