



POST-DISCHARGE REFERRAL PROCESS

This form should be used by discharge planners from any inpatient facility and home health agencies

To initiate a referral to HCMA, a phone call to the practice is required. The following forms should then be faxed to our office by the discharge planner in order to complete the referral process. Once we have received all necessary paperwork, the patient will be contacted to setup an appointment if he/she qualifies for a home visit. It's that simple!

*** AN ORDER IS NOT REQUIRED TO GENERATE A REFERRAL TO HCMA ***

1. HCMA Consent forms (found on our website under the Resource tab). The forms will need to be signed by the patient/caregiver and faxed to HCMA.
2. Facesheet
3. Insurance information
4. History and Physical note
5. Discharge summary or last 3 progress notes of Attending physician and Consultants involved with case (if applicable)
6. Discharge Medication Reconciliation list
7. Admission labs, diagnostic tests (i.e. imaging studies, special procedures) and last labs at discharge
8. Attending physician name and contact information
9. Discharge planner name and contact information
- 10 Home health agency contact information (if applicable)
- 11 Physical, Occupational and/or Speech therapy initial and discharge evaluation notes (if applicable)

Indicate if patient is in need of a Primary Care Physician.

Please feel free to contact our practice manager, Ife Oyeleye for further assistance with the referral process at 770-740-2611. You may also visit our website at www.hcmatl.com to obtain consent forms and a full new patient packet.

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