*The patient and representative (if any), have a right to be informed of our policies for transfer and discharge.*

**We (the HHA) may only transfer or discharge a patient from services if:**

1. The transfer or discharge is necessary for the patient’s welfare because the HHA and the physician who is responsible for the home health plan of care agree that the HHA can no longer meet the patient’s needs, based on the patient’s acuity. The HHA must arrange a safe and appropriate transfer to other care entities when the needs of the patient exceed the HHA’s capabilities;
2. The patient or payer will no longer pay for the services provided by the HHA;
3. The transfer or discharge is appropriate because the physician who is responsible for the home health plan of care and the HHA agree that the measurable outcomes and goals set forth in the plan of care in accordance with §484.60(a)(2)(xiv) have been achieved, and the HHA and the physician who is responsible for the home health plan of care agree that the patient no longer needs the HHA’s services;
4. The patient refuses services, or elects to be transferred or discharged;
5. The HHA determines, under a policy set by the HHA for the purpose of addressing discharge for cause that meets the requirements of this section, that the patient's (or other persons in the patient's home) behavior is disruptive, abusive, or uncooperative to the extent that delivery of care to the patient or the ability of the HHA to operate effectively is seriously impaired. The HHA must do the following before it discharges a patient for cause:
   1. Advise the patient, representative (if any), the physician(s) issuing orders for the home health plan of care, and the patient’s primary care practitioner or other healthcare professional who will be responsible for providing care and services to the patient after discharge from the HHA (if any) that a discharge for cause is being considered;
   2. Make efforts to resolve the problem(s) presented by the patient's behavior, the behavior of other persons in the patient’s home, or situation;
   3. Provide the patient and representative (if any), with contact information for other agencies or providers who may be able to provide care; and
   4. Document the problem(s) and efforts made to resolve the problem(s), and enter this documentation into its clinical records.
6. The patient dies; or
7. The HHA ceases to operate.