

# Alien Emergency Medical (AEM) supporting medical evidence

Alien Emergency Medical (AEM) is a program for individuals who have a qualifying medical emergency and do not meet the citizenship and immigration requirements or are a qualified individual who has not met the 5-year bar. Once an application has been submitted, supporting medical documentation must be provided for clinical review. If clinical staff do not receive the information, they need to make a determination, they may send an information request letter to the provider for additional medical evidence.

In calendar year 2020, the agency made 292 requests for additional supporting documentation. Eligibility decisions may be made timelier, and the hospital may be paid quicker if the documentation was submitted in its entirety.

## How can I make sure clinical staff have the medical evidence they need?

You can help your patients and avoid delays in clinical decisions by:

- Complete AEM cover sheet and include it with the medical evidence you submit. A complete cover sheet should include your name, phone number and fax number.
- Ensure all required documents are submitted at the same time.
- Respond to the clinical information request letter promptly.

## Why did I get a request for information letter from HCA for my patients AEM application?

You received a request for information because clinical staff do not have enough information to make a determination for your patient.

## How do I submit the requested information?

Follow the directions on the letter.

## Tips for ensuring complete medical evidence is submitted for:

### **Emergency department visits**

Ensure the documentation includes the:

- Initial evaluation, including physician evaluation and management, treatment, patient response and disposition,
- Completed hospital claim form (UB04)

### **Outpatient surgery**

- Operative notes (description of procedure performed).
- Copy of the completed hospital claim form (UB04).
  - Documentation of associated emergency visit for initial evaluation (provider evaluation and management, treatment provided, patient response and disposition).
  - Include documentation from surgical consult/referral source to determine emergency condition.



## **Inpatient hospital admission**

In addition to the History and Physical, Hospital discharge summary and hospital claim form (UB04), submit:

- Documentation of associated emergency visit for initial evaluation (provider evaluation and management, treatment provided, patient response and disposition).

Inpatient hospital stays related to Involuntary Treatment Act (ITA) require that providers:

- Obtain authorization from the county BH-ASO. Within 5 days of informed discharge, the BH-ASO must enter the authorization in the ProviderOne portal.

Extended inpatient admission

- Clinical documentation from the first and last date of requested dates (i.e.: if a three-month span is requested, include the provider progress note from the first and last date requested)
- Documentation of transfer note if the client is transferred to a different department, or facility
- If the client is discharged during the requested extension dates, include:
  - The hospital discharge summary.
  - A copy of the completed hospital claim form (UB04).

## **Cancer treatment**

Ensure the documentation includes the:

- Pathology report used to determine the cancer diagnosis.
- Updated oncology consult/progress note that includes - the current treatment plan.
- If cancer diagnosis was established during inpatient admission, include hospital discharge summary.

The Breast and Cervical Cancer Treatment Program (BCCTP) form must include the physician's signature.

## **Dialysis treatment**

- Current dialysis flow charts from dialysis center.
- Treatment plan from the attending physician.

## **Antirejection treatment for a post organ transplant**

- Treatment plan from the attending physician or provider.

## **Resources**

- [HCA AEM webpage](#)
- [HCA AEM billing guide](#) – scroll down to view the most recent billing guide