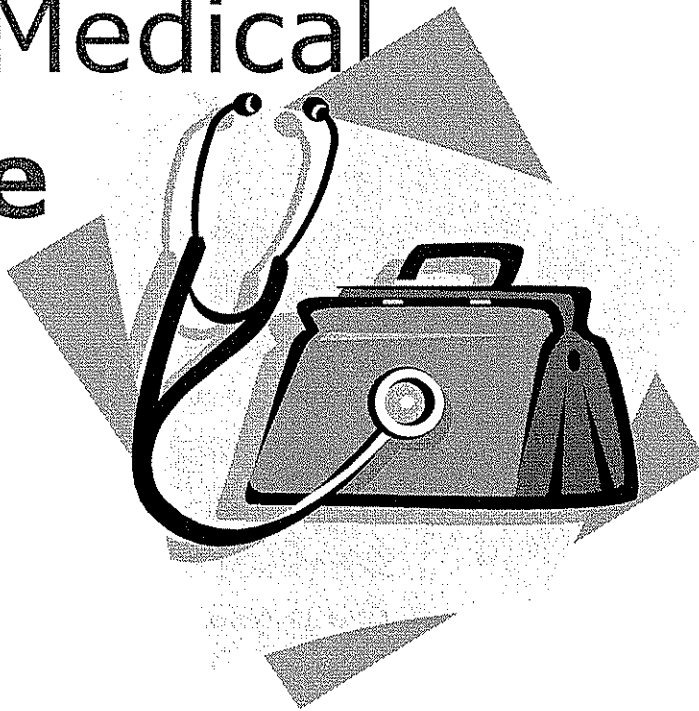


Closing

Your Medical Office



A guide to assist you with the
closing of your medical office



Prepared by the
Medical Society of Delaware's
Physicians Advocacy Program
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Revised 01/2007
Revised 08/2007

❖ Closing Your Medical Practice ❖

Whether you are retiring, relocating, or changing the focus of your medical career, the decision to close your practice is never an easy one. With adequate planning you can ease the transition for everyone involved. To get you started, we have prepared some essential guidelines to assist you in closing your office efficiently. The information in this booklet deals with the closing of your physical office and does not address financial planning, retirement plans, or selling a medical practice.

Information included in this booklet:

- ❖ Closing timeline
- ❖ How to handle your medical records
- ❖ AMA Code of Ethics on closing a practice
- ❖ Delaware law
- ❖ Notification checklist
- ❖ DEA requirements
- ❖ Delaware state licensure requirements
- ❖ Sample letters
- ❖ Sample newspaper ads
- ❖ Delaware contacts
- ❖ Sources

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Information in this booklet is general in nature and may not pertain to your individual needs. Professional assistance with legal, ethical and practice management issues is always advised. Information may have been summarized and paraphrased and is in no way intended as legal advice or standards of practice. Sources of information are listed at the end of the booklet.

❖Closing Timeline❖

Time Period	Task	Completed ✓
Minimum of 2 years before closing	Reduce accounts receivable through improved collection techniques	
	Establish retirement objectives (if applicable)	
	Review and revise financial plans	
	Search for buyer or associates (if applicable)	
At beginning of lease term	Negotiate escape clause into lease	
6 months prior	Determine insurance needs	
3-6 months prior	Notify employees, medical community	
	Notify patients in writing (see DE law)	
	Implement plan for dispersal and/or storage of patient medical records	
	Place ad in local newspapers (see DE law)	
	Plan for disposition of equipment, furniture, supplies	
	Start closing out accounts receivable	
1 month prior	Notify vendors	
	Notify utilities	
	Notify phone service	
Upon closing	Forward mail	

In addition, you should seek legal advice to assure compliance with state laws on closure or transfer. You may also wish to consider setting up a plan of action to allocate a budget for the office closure to include: labor, copy equipment and supplies, postage, telephone, utilities, storage boxes and supplies, and storage space.

❖How to Handle Patient Records❖

Physicians who close their office have a legal, ethical, and practical obligation to their patients. It is your responsibility to protect your patients' health information while at the same time ensuring its availability for continuity of care. To avoid any possibility of abandonment (the unilateral termination of the physician/patient relationship by the physician without the patient's consent and without giving the patient sufficient opportunity to secure the services of another physician), patients should be notified of the practice closing by letter. If the practice is being sold to another physician, the patient should be notified of the name and address of the physician who is buying the practice.

Posting a small handwritten sign in the office or informing patients by word of mouth is not enough. A letter should be sent to all established patients (*those who have received professional services from you or another physician of the same specialty belonging to the same group practice, within the past ~~three~~ years*) 60-90 days in advance of your closure. The letter should include: ~~seven~~

- ❖ When the practice will be closing.
- ❖ The reason for closing.
- ❖ **Notification of where the records will be stored and how to access them.**
- ❖ The need for the patient's written authorization to transfer medical records, and a request that written authorizations be returned by a specified date.
- ❖ An authorization form for the patient to complete and return.
- ❖ Encouragement for patients to begin looking for a new physician immediately. Refer the patient to the Medical Society's Physician Referral Service 302-658-7596 for assistance in finding a replacement physician.
- ❖ A thank you for the opportunity to have been their physician.

Letters to patients do not need to be sent by certified or registered mail. It is only required to make a reasonable attempt to notify patients, so regular mail is sufficient. However, with particularly high risk patients, certified or registered mail with a return receipt requested might be prudent. Place a copy of the notification letter in each patient's chart as well as any returned letters, with the associated envelopes, in the appropriate patients' charts.

❖ American Medical Association ❖

2006-2007 CODE OF MEDICAL ETHICS: Current Opinions with Annotations

E-7.03 Records of Physicians upon Retirement or Departure from a Group.

A patient's records may be necessary to the patient in the future not only for medical care but also for employment, insurance, litigation, or other reasons. When a physician retires or dies, patients should be notified and urged to find a new physician and should be informed that upon authorization, records will be sent to the new physician. Records which may be of value to a patient and which are not forwarded to a new physician should be retained, either by the treating physician, another physician, or such other person lawfully permitted to act as a custodian of the records. The patients of a physician who leaves a group practice should be notified that the physician is leaving the group. Patients of the physician should also be informed of the physician's new address and offered the opportunity to have their medical records forwarded to the departing physician at his or her new practice location. It is unethical to withhold such information upon request of a patient. If the responsibility for notifying patients falls to the departing physician rather than to the group, the group should not interfere with the discharge of these duties by withholding patient lists or other necessary information. (IV) Issued prior to April 1977; Updated June 1994, June 1996 and February 2002.

updated 01/2007

E-7.04 Sale of a Medical Practice.

A physician or the estate of a deceased physician may sell the elements that comprise his or her practice, such as furniture, fixtures, equipment, office leasehold, and goodwill. In the sale of a medical practice, the purchaser is buying not only furniture and fixtures, but also goodwill, i.e., the opportunity to take over the patients of the seller. A patient's records may be necessary to the patient in the future not only for medical care but also for employment, insurance, litigation, matriculation, or other reasons. Therefore, the transfer of records of patients is subject to the following:

(1) The physician (or the estate) must ensure that all medical records are transferred to another physician or entity who is held to the same standards of confidentiality and is lawfully permitted to act as custodian of the records.

(2) All active patients should be notified that the physician (or the estate) is transferring the practice to another physician or entity who will retain custody of their records and that at their written request, within a reasonable time as specified in the notice, the records (or copies) will be sent to another physician or entity of their choice.

(3) A reasonable charge may be made for the cost of locating, duplicating, and mailing records. (IV) Issued July 1983; Updated June 2000.

E-7.05 Retention of Medical Records.

Physicians have an obligation to retain patient records, which may reasonably be of value to a patient. The following guidelines are offered to assist physicians in meeting their ethical and legal obligations:

(1) Medical considerations are the primary basis for deciding how long to retain medical records. For example, operative notes and chemotherapy records should always be part of the patient's chart. In deciding whether to keep certain parts of the record, an appropriate criterion is whether a physician would want the information if he or she were seeing the patient for the first time.

(2) If a particular record no longer needs to be kept for medical reasons, the physician should check state laws to see if there is a requirement that records be kept for a minimum length of time. Most states will not have such a provision. If they do, it will be part of the statutory code or state licensing board.

(3) In all cases, medical records should be kept for at least as long as the length of time of the statute of limitations for medical malpractice claims. The statute of limitations may be three or more years, depending on the state law. State medical associations and insurance carriers are the best resources for this information.

(4) Whatever the statute of limitations, a physician should measure time from the last professional contact with the patient.

(5) If a patient is a minor, the statute of limitations for medical malpractice claims may not apply until the patient reaches the age of majority.

(6) Immunization records always must be kept.

(7) The records of any patient covered by Medicare or Medicaid must be kept at least five years.

(8) In order to preserve confidentiality when discarding old records, all documents should be destroyed.

(9) Before discarding old records, patients should be given an opportunity to claim the records or have them sent to another physician, if it is feasible to give them the opportunity. (IV, V) Issued June 1994.

❖ Delaware Law ❖

Physicians discontinuing their practice must comply with the Delaware Code regarding notification of patients: *Delaware Code: TITLE 24 Professions and Occupations: CHAPTER 17. MEDICAL PRACTICES ACT: Subchapter VI. General Provisions: § 1761. Physician discontinuing business or leaving State; death of a physician; notification of patients.*

(a) A person certified to practice medicine under this chapter who is discontinuing a medical-practice business in this State or who is leaving this State and who is not transferring patient records to another person certified to practice medicine shall notify that person's patients of record by publishing a notice to that effect in a newspaper of daily circulation in the area where the person practices. The notice must be published at least 1 time per month over a 3-month period in advance of discontinuing the business or leaving the State and must explain how a patient can procure that patient's patient records. All patients of record who have not requested their records 30 days before the person discontinues the medical-practice business or leaves the State must be notified by first class mail by the person to permit that person's patients to procure their records. Any patient records that have not been procured within **7 years** after the person discontinues business or leaves the State may be permanently disposed of in a manner that ensures confidentiality of the records.

(b) If a person certified to practice medicine under this chapter dies and has not transferred patient records to another person certified to practice medicine and has not made provisions for a transfer of patient records to occur upon the person's death, a personal representative of the person's estate shall notify the person's patients of record by publishing a notice to that effect in a newspaper of daily circulation in the area where the person practiced. The notice must be published at least 1 time per month over a 3-month period after the person's death and must explain how a former patient can procure the patient's patient records. All former patients who have not requested their records 30 days after such publication must be notified by first class mail by the personal representative of the estate to permit the patients to procure their records. Any patient records that have not been procured within **7 years** after the death of the person may be permanently disposed of in a manner that ensures confidentiality of the records.

(c) If a patient changes from the care of one person certified to practice medicine to another person certified to practice medicine, the former person shall transfer a copy of the records of the patient to the current person upon the request of either the current person or the patient. The former person may charge for the reasonable expenses of copying the patient's records, not to exceed \$25. Alternatively, if the patient and current person agree, the former

person may forward to the current person a summary of the patient's record, in lieu of transferring the entire record, at no charge to the patient. If a patient changes care from one person certified to practice medicine to another and fails to notify the former person, or leaves the care of the former person for a period of 7 years from the last entry date on the patient's record and fails to notify the former person, or fails to request the transfer of records to the current person, then the former person shall maintain the patient's records for a period of 7 years from the last entry date in the patient's medical record, after which time the records may be permanently disposed of in a manner that insures confidentiality of the records.

(d) This section does not apply to a person certified to practice medicine who has seen or treated a patient on referral from another person certified to practice medicine and who has provided a record of the diagnosis and/or treatment to the other person, or to a hospital or an agency which has provided treatment for the patient.

(e) A person certified to practice medicine or the personal representative of the estate of such person who disposes of patient records in accordance with the provisions of this section is not liable for any direct or indirect loss suffered as a result of the disposal of a patient's records.

(f) Any person certified to practice medicine in this State who violates this section may be found by the Board to have committed unprofessional conduct, and any aggrieved patient or the patient's personal representative may bring a civil action for damages or injunctive relief, or both, against the violator. (64 Del. Laws, c. 372, § 1; 68 Del. Laws, c. 197, §§ 1, 2; 68 Del. Laws, c. 392, § 1; 70 Del. Laws, c. 186, § 1; 72 Del. Laws, c. 308, §§ 1, 2, 3; 73 Del. Laws, c. 59, §§ 1, 2; 75 Del. Laws, c. 141, § 1.)

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❖ Notification Checklist ❖

The following list will help you identify offices/people with whom you do business that need to be notified about the closing of your office. There may be other contacts you will need to make, but this list should get you started:

Contact/Action	✓	Notes
Delaware Board of Medical Practice		
Federal DEA		
Delaware Office of Controlled Substances (CSA) License		
Hospital(s) re: privileges		
Outpatient/Nursing Home facilities		
Insurance carriers		
Malpractice carrier		
Office leasing/management		
Bank/financial institutions		
US Postal Service		
Utility companies		
Computer IT /Internet		
Software vendor		
Computer hardware		
Office/Medical Vendors		
Professional organizations		
News/Magazine subscriptions		
Medical Society of Delaware (location of medical records)		
Others:		
		Revised 01/2007

❖Drug Enforcement Agency Requirements❖

The Federal DEA and the Delaware Office of Controlled Substances, both of whom issue the physician's certificate of registration, must be notified when a physician retires, dies or changes the location of a practice.

Federal DEA: A practitioner who moves to a new location must request a modification of registration. It is the practitioner's responsibility to notify the DEA about a change of address before the effective date of the move. The notice of change of address should be made in writing to the local DEA office. An Address Change Request is available on the Internet at www.DEAdiversion.usdoj.gov. The form must be manually signed and faxed or mailed to the local DEA office. The request must include a copy of the practitioner's current state medical/professional license for the new address along with a copy of the practitioner's corrected state controlled substance registration if applicable. For Registration Support, please call 1-800-882-9539.

Delaware CSA: Office of Controlled Substances, Division of Public Health, at (302) 744-4547.

The Delaware Office of Narcotics and Dangerous Drugs is charged with the responsibility of monitoring and enforcing Delaware drug statutes and regulations. All registrants, including practitioners registered to dispense and administer controlled substances, are subject to fulfilling these requirements under Delaware law. Questions/issues regarding the disposal of narcotics and/or dangerous drugs are handled by this office. Contact the Office of Narcotics and Dangerous Drugs (302) 834-2630, Ext. 351 to arrange for the proper handling of these items upon the office closure.

The State Board of Medical Practice should also be advised of any changes in residence or practice location, as well as changes in licensure status.

❖ Delaware State Licensure ❖

General Renewal Information

Effective with the 2006/2007 renewal, the Division of Professional Regulation offers online renewal for Medical licenses other than ACGME Training licenses at <https://dpronline.delaware.gov/MyLicense%20Enterprise/Login.aspx>. Physicians will receive a written notice to advise when the renewal application is available online. This will be the only renewal notice. The notice will explain how to access online renewal and how to request a paper renewal application if the physician is unable to renew online. The license period expires on March 31 of odd-numbered years (2007, 2009, etc.). Renewal notices will be released in January. If you do not renew your license before the expiration date, your license will expire. It is illegal to practice while your license is expired.

Physicians and Physician Assistants may renew a license for a period of six months after the expiration date by submitting a renewal application and paying a late fee. The renewal application will be available online. However, if the license has been expired for more than six months, you must reapply.

Retiring physicians who wish to maintain a license for prescriptive purposes must continue to satisfy CME licensing requirements. Licensees must certify that they have completed 40 hours of Continuing Medical Education that has been approved as Category 1 by the American Medical Association or the American Osteopathic Association. A percentage of licensees will be randomly selected for audit of their CME following the renewal.

For specific questions concerning licensure, please contact the Board of Medical Practice at (302) 739-4522 or visit their website <http://professionallicensing.state.de.us/boards/medicalpractice/index.shtml>

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❖ Sample Letters ❖

Following are samples of patient notification letters to use when a practice is being closed.

Dear _____:

Please be advised that because of [my retirement/health reasons/etc.] I am discontinuing the practice of medicine on _____, 20___. I shall not be able to attend to you professionally after that date.

I suggest that you arrange to place yourself under the care of another physician. If you are not acquainted with another physician, I suggest that you contact your insurance company for a referral to the provider directory of that organization. If you do not have health insurance, you may contact your local hospital's physician referral service or the Medical Society of Delaware at (302) 658-7596. Once you have identified a physician or physicians you are considering selecting, be sure to check with your insurer or managed care organization to verify that his or her services are covered by your health plan. In the event a medical emergency arises in the interim, please remember that assistance is always available from the Emergency Departments at the local hospitals.

I shall make my records of your care available to the physician you designate. However, since your medical records are confidential, I shall require your written authorization to make them available to another physician. For this reason, I am including an authorization form. Please complete the form, sign it, and return to me by _____.

I regret that I cannot continue as your physician. I extend to you my best wishes for your future health and happiness.

Yours very truly,

_____, M.D./D.O.

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Dear _____:

As a valued patient, I want to let you know about my plans to leave my _____ medical practice as of _____, 20___. I will be retiring and moving to _____.

My current practice will be assumed by _____, M.D./D.O. Doctor _____ may already be familiar to you, as he/she worked in the _____ Hospital emergency room for the past two years. Doctor _____ has training and a background in internal medicine. I've known him/her for several years and find him/her to have a friendly, personable manner with patients.

I have sincerely enjoyed our physician-patient relationship over the past ___ years, but I'm convinced that Doctor _____ and his/her capable assistants (_____ and _____, who'll be staying with the practice) will do their best to serve you well in the future.

If you have any specific questions about your health that you'd like to discuss with me, please call or schedule an appointment before _____, 20___. After that date, Doctor _____ will be pleased to help you.

Sincerely,

_____, M.D.

Dear Patients:

I am writing this letter to you with mixed emotions. I am now announcing my retirement from active practice, effective (date) _____. This has not been an easy decision for me to make. Caring for my patients has been a great source of satisfaction and pleasure these past years.

I am anxious that you continue to receive quality medical care. I'm therefore pleased to announce that as of (date)_____, Doctor (full name) _____ will be taking over my practice. Doctor (name) _____ is a graduate of (name of medical school) _____. He/She served his internship at (name of hospital) _____ in (location) _____, and he/she completed his/her residency in (specialty)_____ at (name of institution) _____. It's reassuring to me to be able to leave my patients in the hands of such a well-trained physician.

Of course, you're free to seek care elsewhere if you wish; if so, please begin looking for another doctor as soon as possible. If you don't know where to begin, I suggest you contact your insurance company for a referral from their provider directory. If you do not have insurance, you may contact your local hospital's physician referral service or the Medical Society of Delaware's at (302) 658-7596. In any event, be sure to check with your insurer or managed care organization to verify that the services of the physician or physicians you are considering selecting are covered by your health plan. In the event a medical emergency arises in the interim, please remember that assistance is always available from the Emergency Department of your local hospital.

The contents of your medical chart are confidential and can be transferred to another doctor only with your permission. If you plan to see a physician other than Doctor (name)_____, please sign the enclosed authorization form and return it to my office as soon as possible. Your records will continue to be on file in my former office. If you elect to be treated by Doctor (name)_____, you should sign an authorization on or before your next visit to the office to release your records to his files. Custody of unrequested records will be transferred to Doctor (name)_____.

I have valued my relationship with you, my patients, more than I can express in words. I thank you for your many years of loyalty and friendship. My staff and I extend our best wishes for your future health and happiness.

Sincerely,

_____, M.D./D.O.

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❖Sample Ads❖

_____, M.D./D.O.
Announces his/her Retirement
FROM THE PRACTICE OF _____
EFFECTIVE _____, 20__
Continued _____ care will be provided by
_____, M.D.

_____, D.O.
*1234 Oakland Drive
Wilmington, DE 12345
(302) 123-4567*
Dr. _____ announces his/her retirement
from medical practice effective _____.
Patients are invited to call the office for information
regarding their medical records.
My practice will be assumed will be assumed
by Dr. _____.

_____, M.D./D.O.
IS RETIRING FROM

AS OF

*patients may be seen by other
physicians in the practice.

_____, M.D.

Announces his/her retirement

FROM THE PRACTICE OF _____

EFFECTIVE _____

Charts will be available at

Dover, DE 12345

302-123-4567

UNTIL _____

(302) 123-4567

is closing as of _____.

Current patients may call to pick up

copies of their medical records,

otherwise Dr. _____

will continue seeing patients at

Milford, DE 12345

(302) 876-5432

❖ Delaware Contacts ❖

Hospitals and Medical Centers

A.I. duPont Hospital for Children
P.O. Box 269
Wilmington, DE 19899
(302) 651-4000

MeadowWood Hospital
575 S. DuPont Highway
New Castle, DE 19720
(302) 328-3330

Bayhealth Medical Center at
Kent General Hospital
640 South State Street
Dover, DE 19901
(302) 674-4700

Nanticoke Memorial Hospital
801 Middleford Rd.
Seaford, DE 19973
(302) 629-6611

Bayhealth Medical Center at
Milford Memorial Hospital
Clarke Avenue
Milford, DE 19963
(302) 422-3311

St. Francis Hospital
7th & Clayton Streets
P.O. Box 2500
Wilmington, DE 19805
(302) 421-4100

Beebe Medical Center
424 Savannah Rd.
Lewes, DE 19958
(302) 645-3300

Union Hospital of Cecil County
106 Bow Street
Elkton, MD 21921
(302) 731-0743

Delaware Psychiatric Center
1901 N. DuPont Highway
New Castle, DE 19720
(302) 577-4000

Wilmington VA Medical Center
1601 Kirkwood Highway
Wilmington, DE 19805
(302) 994-2511

Christiana Care Health System
Executive Offices
P.O. Box 1668
Wilmington, DE 19899
(302) 733-1000

Insurance Carriers

Aetna Health Plans of NJ, Inc.
650 Naamans Rd, Suite 300
Wilmington, DE 19703
(302) 793-1520

Aetna
2201 Renaissance Blvd.
P.O. Box 61516
King of Prussia, PA 19406
(484) 322-6762

AmeriHealth HMO, Inc.
919 N. Market Street, Suite 1200
Wilmington, DE 19801
(302) 777-6400

BCBSD, Inc.
One Brandywine Gateway
P.O. Box 1991
Wilmington, DE 19899
(302) 421-3000

Cigna Healthcare of DE, Inc.
I-95 & Naamans Rd.
Wilmington, DE 19803
(302) 477-3700

Christiana Care Health Plan
11 Reads Way
New Castle, DE 19720
(800) 362-4214
Coventry Health Plan of Delaware
2751 Centerville Road, Suite 400
Wilmington, DE 19808
(302) 995-6100

Delmarva Health Plan, Inc.
301 Bay Street, Suite 401,
P.O. Box 2410
Easton, MD 21601
(800) 334-3427 (410) 822-7223

Optimum Choice, Inc.
220 Continental Drive
Newark, DE 19713
(302) 369-1222
or
4 Taft Court
Rockville, MD 20850
(302) 762-8205

Trailblazer Health Enterprises, Inc.
1954 Greenspring Dr., Suite 600
Timonium, MD 21093
(410) 683-2627

Unison Health Plan of Delaware
Powder Mill Square
3844 Kennett Pike
Greenville, DE 19807-2305
Phone: 302-429-7808
Fax: 412-457-1573

United Healthcare
6300 Security Blvd.
Baltimore, MD 21207
(410) 277-6027

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Other Contacts

Gayle Lynn MacAfee, MS
Executive Director
Delaware Board of Medical Practice
Cannon Building, Suite 203
861 Silver Lake Blvd.
Dover, DE 19904
(302) 744-4500

US Drug Enforcement Administration (DEA)
Attn: Registration
Wm. J. Green Fed. Bldg.,
600 Arch Street, Room 10224,
Philadelphia, PA 19106
(215) 238-5160

Delaware Health And Social Services
Division Of Public Health
Office Of Controlled Substances
Jesse Cooper Bldg Room 205
417 Federal Street
Dover, De 19901
(302) 744-4547

Mark A. Meister, Sr., Executive Director
The Medical Society of Delaware
131 Continental Drive, Suite 405
Newark, DE 19713
(302) 658-7596

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❖ Sources ❖

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Pennsylvania Medical Society, Planning for Your Retirement; 1992.

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