Text messaging is a convenient, familiar and effective transition management tool when implemented as part of an overall readmissions improvement strategy by hospitals, skilled nursing facilities, physician practices, home health agencies and more.

For example, home health agencies can use text messaging to remind beneficiaries to contact them if challenges arise between scheduled doctor visits.

Read on for valuable tips on implementing a post-discharge text messaging program.

Additional information and example consent forms and processes, logic diagrams and vendor information can be found in the Texting Better Care Toolkit: https://www.careinnovations.org/resources/texting-better-care-toolkit/

**Health Insurance Portability and Accountability Act (HIPAA), Consent and Compliance Considerations**

Involves the facility or health system compliance officer to review the pilot or rollout to ensure compliance with HIPAA, the Telephone Consumer Protection Act (TCPA) and other pertinent federal, state or local regulations.

Considerations include:

- Process for obtaining and documenting consent
- Process for opt-out at any time, honored immediately and communicated during each message
- Controls that ensure no marketing is perceived
- Time of day restrictions
- Controls to ensure that messages go only to numbers authorized to receive these specific messages
- Restrict health information to extent possible
- Record retention

**Message Development Considerations**

- Keep messages clear and concise
- Clearly state your opt-out process
- Ensure messages are culturally appropriate
- Consider the health literacy of enrolled recipients
- Establish and publish anticipated response times to replies
- Create messages for enrollment, appointment check-in/follow-up and closing message
- Utilize patient advisors to obtain feedback on proposed message content, delivery schedules/times and message frequency

**Vendor Selection Considerations**

- Security
- Convenience
- Text message fees/cost
- Ability to integrate with existing systems
- Level of internal IT support and external support needed
- Degree of customization available/needed (e.g., utilizing group texting when patients consent to inclusion of a care

**Operational Considerations:**

- Texting schedule
- Response time frames
- Care Partner engagement
- Text monitoring, response and backup processes
- Downtime processes
- Inclusion of process in facility or health system emergency preparedness plan

**Additional resources:**

1. **Texting Better Care Toolkit:** [https://www.careinnovations.org/resources/texting-better-care-toolkit/](https://www.careinnovations.org/resources/texting-better-care-toolkit/)  
   This toolkit was developed in part through the UCSF Center for Vulnerable Populations (CVP) and Public Healthcare Evidence Network and Innovation eXchange (PHoENIX), supported by the Agency for Healthcare Research and Quality (AHRQ) grant number R24HS022047.


3. **JAMA Study:** [https://jamanetwork.com/journals/jamanetworkopen/fullarticle/2797716](https://jamanetwork.com/journals/jamanetworkopen/fullarticle/2797716)