



CERT ALERT: MD ORDERS REQUIRED FOR LABORATORY SERVICES

WPS Medicare has identified a recent increase in the number of errors attributed to lack of physician orders for diagnostic laboratory services billed. CMS guidelines define an order as below:

Order

An "order" is a communication from the treating physician/practitioner requesting that a diagnostic test be performed for a beneficiary. The order may conditionally request an additional diagnostic test for a particular beneficiary if the result of the initial diagnostic test ordered yields to a certain value determined by the treating physician/practitioner (e.g., if test X is negative, then perform test Y). An order may be delivered via the following forms of communication:

- A written document signed by the treating physician/practitioner, which is hand-delivered, mailed, or faxed to the testing facility;
- A telephone call by the treating physician/practitioner or his/her office to the testing facility; and
- An electronic mail by the treating physician/practitioner or his/her office to the testing facility.

If the order is communicated via telephone, both the treating physician/practitioner or his/her office, and the testing facility must document the telephone call in their respective copies of the beneficiary's medical records.

If you receive a request for medical records from the CERT contractor or your local Medicare contractor, it is critical that the physician orders for all laboratory services be included. Without the orders, the services will be determined to be medically unnecessary and payment for these services will be rescinded.

For more information, go to:

<http://www.cms.hhs.gov/Transmittals/Downloads/R80BP.pdf>