



Policy Information

Policy Title	Medical Orders	Current Version Publish Date	12/2025
Policy Manual	Reimbursement Policy Manual	Original Effective Date	12/2025
Policy Number	19	Next Review Date	Annual

Policy Applicability (LOB)

<input checked="" type="checkbox"/> Medicare Inc	<input checked="" type="checkbox"/> Commercial IA	<input checked="" type="checkbox"/> Commercial IL	<input checked="" type="checkbox"/> Health Choices
<input checked="" type="checkbox"/> Medicare WI	<input checked="" type="checkbox"/> Commercial WI	<input checked="" type="checkbox"/> CPPHP (Kansas)	

Policy Statement and Purpose

This policy addresses the criteria for medical orders. The stipulations herein are based on CMS coding and payment requirements. CMS updates these files quarterly. It is the provider's responsibility to follow the guidelines for the date of service that services were rendered. If coding is inconsistent with CMS guidelines, payment may be denied. Where CMS is silent, industry standards have been applied. Adhering to these guidelines does not imply payment, only eligibility for reimbursement. Actual payment for services will be guided by the services documented in the medical record and the coverage criteria in the patient's contracted medical plan for whom the services are rendered.

This policy is expressly incorporated into and made a part of all reimbursement agreements and will provide context and clarity to the extent there is ambiguity in payment terms and notwithstanding contrary claims with regard to industry standards or practices.

Policy Definitions

CPOE: Computerized provider order entry

Computerized provider order entry (CPOE): A system that allows healthcare providers to electronically enter and send medical orders—such as medication, laboratory, radiology, admission, referral, and procedure orders—directly into a computer application, replacing traditional methods like paper charts, fax, or telephone.

DDS: Doctor of Dental Surgery

Digital Signature: A type of electronic signature that uses cryptographic techniques to ensure document integrity, authenticity, and non-repudiation.

Digitized Signature: A scanned or image-based representation of a handwritten inked signature that is inserted into a digital document. A digitized signature is not a standard or legally recognized category of digital signatures.

Discharge: (For the purposes of this policy) The formal release of a patient from a hospital or healthcare facility after treatment, marking the end of an episode of care.

DMD: Doctor of Dental Medicine

DME: Durable Medical Equipment

DMEPOS: Durable Medical Equipment, Prosthetics, Orthotics and Supplies

DO: Doctor of Osteopathy

DPM: Doctor of Podiatric Medicine

Electronic Signature: A signature that is uniquely linked to the signatory, capable of identifying the signatory, and under the sole control of the signatory during signature creation.

Inpatient: Admission to a hospital or skilled nursing facility on a physician's order.

MD: Medical Doctor

Medical Order: As defined by CMS is a directive issued by a qualified practitioner, such as a physician or other licensed healthcare provider, for the administration of specific medical services, treatments, or medications to a patient.

NP: Nurse Practitioner

Outpatient: Facility care that a person receives without being admitted or for a stay of less than 24 hours even if this stay occurs overnight.

PA: Physician Assistant

Pre-Printed Order: A standardized set of instructions that a physician can use repeatedly by checking off the desired elements and signing the document. Pre-printed orders are designed for common procedures or patient conditions.

Qualified Healthcare Professional: Registered nurses and other healthcare staff that are qualified by education and experience to perform professional services under the direction of a physician (MD, DO), dentist (DDS, DMD), nurse practitioner or physician assistant.

Qualified Healthcare Practitioner: A physician or other qualified health care professional who is qualified by education, training, licensure/regulation (when applicable) and facility privileging (when applicable) who performs a professional service within his/her scope of practice and independently reports that professional service.

Standing Order: A written protocol approved by an authorized **Qualified Healthcare Practitioner**, such as a physician, nurse practitioner, or physician assistant that permits qualified healthcare staff to perform specific clinical tasks without requiring individual physician approval for each instance.

Policy Provisions and Required Procedures

A medical order is required for every admission, procedure, treatment, DMEPOS, and drug. The requirements for medical orders are stipulated below.

AUTHORIZED SIGNERS OF A MEDICAL ORDER

- The order must be signed by a provider licensed in the state where the services were rendered with sufficient knowledge of the case and authorized by the facility or practice group to certify the order.
 - A provider whose sole knowledge of a case is derived solely from a medical record review is not deemed a practitioner with sufficient knowledge.
- Orders for admission, treatment, procedures, DMEPOS and drugs signed by the following provider types are eligible for reimbursement:
 - **Qualified Healthcare Practitioners:** MD, DO, DMD, DDS, DPM, NP, PA
 - **Qualified Healthcare Practitioners without admitting privileges:** May act as a proxy if authorized under state law and ordering physician approves of the decision and countersigns prior to the discharge in the case of an admission or prior to the treatment or procedure. Medical residents may act as proxy if state laws permit.

SIGNATURE REQUIREMENTS

- Any service or supply requiring an order must be authenticated by the ordering provider and dated. Orders for admissions, services and supplies that are retroactively signed and dated are not eligible for reimbursement. The authentication of an order is accomplished by a signature.
 - **Acceptable signature types**
 - Handwritten: Must be legible and identifies the provider and professional designation/credentials.
 - Exceptions:
 - Illegible signatures are acceptable if supported by a signature log or attestation statement verifying the authors' identity.
 - Illegible signature over a typed or printed name or letterhead.
 - Electronic signatures: Must contain date and time stamp and a printed statement such as "*electronically signed by*" or "*verified/reviewed by*" followed by the provider's full name and professional designation/credentials.
 - Digital signatures: Signatures that are generated by special encrypted software which allows for sole usage.
 - **Unacceptable signature types**
 - Auto-authentication or Auto-signature: Does not require the practitioner to review the entry before signing. These signature types will usually state "*Signed but not read*".
 - Stamped signatures via rubber stamp
 - Exception: if the provider has a physical disability that prevents signing. There must be a certification that the provider has reviewed the document.
 - Digitized signatures: Scanned image of a wet signature. This is similar to rubber stamping a signature.
 - Exception: if the provider has a physical disability that prevents signing. There must be a certification that the provider has reviewed the document.

VERBAL ORDERS

Verbal orders for admission, treatment, procedures, DMEPOS and drugs are eligible for reimbursement under the following conditions:

- Verbal orders are compliant with federal laws, state laws, and hospital policies.
- Ordering practitioner must communicate the order directly to the scribe usually a registered nurse.
- Ordering provider:
 - **Facility admission orders**: Must countersign **prior** to discharge.
 - **Treatments/Procedures/Drugs orders**: Must countersign **prior** to the initiation of treatment or procedure.
 - **DMEPOS orders**: Acceptability of verbal orders is dependent upon whether the item is on the [REQUIRED FACE-TO-FACE ENCOUNTER AND WRITTEN ORDER PRIOR TO DELIVERY LIST](#) (See DMEPOS section below for additional information)
 - DME that **are not** on the above list: Verbal orders to the supplier are eligible for reimbursement provided the written order is obtained prior to billing the DME.
 - DME that **are** the above list: Verbal orders are not eligible for reimbursement.

INPATIENT/OUTPATIENT ADMISSION ORDERS

- For inpatient admissions the ordering provider must personally sign a formal order for admission or countersign initial orders that were provided verbally.
- The signed and dated admission order must be documented in the medical record **prior** to discharge.
- Retroactive orders for procedures and treatments are not eligible for reimbursement.
- Admissions with admission orders signed after discharge are not eligible for reimbursement. There are no exceptions. All services and supplies provided during the admission are also not eligible for reimbursement.

DMEPOS ORDERS

- Below are the required elements of a standard written order/prescription for all DMEPOS Items:
 - Beneficiary name or Medicare Beneficiary Identifier (MBI)
 - Description of the item
 - Quantity, if applicable
 - Order date
 - Treating practitioner name or National Provider Identifier (NPI)
 - Treating practitioner signature

Exception: Physicians who are suppliers of DME are not required to write an order provided that the medical record contains all the information that would be required of an order.

- Additional Requirement:
 - In addition to the standard order there are 75 items that require **both** a face-to-face encounter **and** a written order prior to delivery. [REQUIRED FACE-TO-FACE ENCOUNTER AND WRITTEN ORDER PRIOR TO DELIVERY LIST](#).
 - The order must be submitted to the supplier prior to filing a claim.

STANDING AND PRE-PRINTED ORDERS

Services and items ordered by standing and pre-printed orders are eligible for reimbursement under the following conditions:

- Dated
- Timed
- Authenticated by ordering provider
- Consistent with facilities policies on such orders
- Orders for facility admissions may not be a standing or pre-printed order

COMPUTERIZED ORDER ENTRY (CPOE)

Services and items ordered by CPOE orders are eligible for reimbursement under the following conditions:

- Original order must be scanned
- Order must be linked to the electronic medical record

Related Policies	
Related Training/ Job Aids	
NCQA Standard	

References	Standard Elements for DMEPOS Orders Medicare Benefit Policy Manual Medicare Program Integrity Manual/Chapter 3 Complying with Medicare Signature Requirements		
Exhibits			
Policy Owners / Reviewers			
Department Owner	Lisa Kuhls	Date Reviewed	12/2025
Department Reviewer	Network Strategy Committee	Date Reviewed	12/2025
Approving Committee if applicable	<input type="checkbox"/> Compliance <input checked="" type="checkbox"/> UMC <input type="checkbox"/> QIC <input checked="" type="checkbox"/> Board of Directors <input type="checkbox"/> Other: _____	Date Approved	2/2026 3/2026
History			
<i>Date of revision</i>	<i>Summary of changes</i> <u>Prior Reviews:</u> Revised: Reviewed:		