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QIO Lets Hospital Off the Hook on Pre-Oct. 1 Orders; PA: Change Is About Co-Signing

By Nina Youngstrom

There's an unburdening now that Medicare auditors aren't denying inpatient hospital claims when there's no physician admission order, even as some hospitals try to improve their compliance with the order requirement by using technology and hospitalists. Meanwhile, short-stay audits may go better than anticipated, if one hospital's experience with denials stemming from admission orders before the regulation changed is predictive.

The 2019 inpatient prospective payment system regulation, which took effect Oct. 1, 2018, was a watershed moment for admission orders. CMS said physician orders won't make or break claims for medically necessary inpatient admissions anymore (*RMC 8/6/18, p. 1*). Auditors will no longer insist on a written admission order for Medicare Part A payment, "although hospitals and physicians are still required to document relevant orders in the medical record to substantiate medical necessity requirements." CMS said it made this change because it was disturbed that Medicare auditors denied admissions solely because of missing or deficient orders.

So Brian Kozik, chief compliance officer at Lawrence General Hospital in Massachusetts, was concerned when Livanta, one of two quality improvement organizations (QIOs) that audit short hospital stays, cited the lack of physician orders or unsigned orders when it audited 25 claims.

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