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|  | Regulatory Compliance Policy | No. | COMP-RCC 5.05 |
| | Title: STANDING ORDERS FOR OUTPATIENT TESTS OR SERVICES | Page: | 1 of 3 |
| | | Effective Date: | 07-30-19 |
| | | Previous Versions Dated: | 06-18-19; 09-27-11; 06-01-11 |
| | | Corporate Review Dated: | 07-19-19 |

I. SCOPE:


This policy applies to (1) Tenet Healthcare Corporation and its wholly-owned subsidiaries and affiliates (each, an “Affiliate”); (2) any other entity or organization in which Tenet Healthcare Corporation or an Affiliate owns a direct or indirect equity interest greater than 50%; and (3) any hospital or healthcare facility in which an Affiliate either manages or controls the day-to-day operations of the entity (each, a “Tenet Entity”) (collectively, “Tenet”).

II. PURPOSE:

The purpose of this policy is to standardize the process for accepting standing orders for outpatient tests or services provided by all Tenet Entities.

III. DEFINITIONS:

- A. **“Standing Orders”** mean those orders used for specific patients with specific conditions who require regular and repeated Outpatient Tests or Services.
- B. **“Licensed Independent Practitioner”** means, in the context of this policy, a medical doctor or any practitioner who is authorized by state law to order tests or services and/or is legally accountable for establishing the patient’s diagnosis.
- C. **“Outpatient Tests and Services”** mean hospital or other health care organization services other than room and board and professional services. Examples of outpatient tests and services include diagnostic imaging, pharmacy, laboratory and therapy services.
- D. **“Authentication”** means an author’s validation of his or her own entry in a document. Methods may include written signatures, faxed signatures or computer “signatures” depending on state law and medical staff bylaws.
- E. **“Protocol”** means a treatment regime or standardized specifications for care of any patient having a specifically-defined care need (e.g., an order for transfusion of blood or blood products will precipitate multiple laboratory tests to determine blood compatibility). A Protocol directs patient care in the absence of a Licensed Independent Practitioner order; the Protocol is a suggested guideline of services which might be performed for patients with a given condition. Protocols must be valid and approved in accordance with the Tenet Entity’s Medical Staff bylaws, rules and regulations, state and federal regulations and standards of accrediting organizations. An appropriate Protocol allows patient care staff to initiate orders or care in absence of the Licensed Independent Practitioner but does not imply there can be an automatic, linked, or exploding condition in the information system to automatically order a test.

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- F. **“Protocol Orders”** mean orders for chargeable tests or services within a valid, approved facility Protocol. (See Regulatory Compliance policy COMP-RCC 5.07 Protocol Orders.)
- G. **“Qualified Individuals”** mean those persons qualified by specific state laws, rules and regulations and the Tenet Entity’s Medical Staff bylaws to accept verbal orders for outpatient tests or services.
- H. **“Outpatient Laboratory Requisition”** means a written document listing tests that are available for Licensed Independent Practitioners to order. It can serve as evidence of the services the Licensed Independent Practitioner intended to order if it is also adequately documented in the medical record. For computerized systems, there may not be a written requisition; however, the order entered in the computer can serve as evidence of the Licensed Independent Practitioner’s intent if all of the required elements are present.
- I. **“Routine Orders”** describe tests that always are performed on each and every patient without documentation of a Licensed Independent Practitioner’s order and that are not specific to the patient (e.g., Comprehensive Metabolic Profile on all pre-op patients).
- J. **“Verbal Orders”** mean orders for medication, treatment, intervention or other patient care that are transmitted as oral, spoken communications between senders and receivers, delivered either face-to-face or via telephone. (See Regulatory Compliance policy COMP-RCC 5.01 Orders for Outpatient Tests and Services.)

IV. POLICY:

Tenet Entities may accept Standing Orders provided the Orders are renewed at least annually by the Tenet Entity and ordering Licensed Independent Practitioner.

V. PROCEDURE:

- A. Tenet Entity Implementation
 - 1. In addition to the elements required for valid Licensed Independent Practitioner orders (see [Regulatory Compliance policy COMP-RCC 5.01 Orders for Outpatient Tests and Services](#)), requests for Standing Orders must include the frequency of testing, to include start and stop dates. The entire Standing Order may not exceed twelve consecutive months. The Licensed Independent Practitioner must authenticate, date and time the Standing Order, which must be retained in the medical record.
 - 2. Each Tenet Entity must have a process in place to manage Standing Orders, including:

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- a. notification to the Tenet Entity when a patient’s condition changes and/or Standing Orders are no longer necessary; and
- b. annual review to ensure the Tenet Entity is not providing tests or services based on an expired Standing Order.

3. Routine Orders

Tenet Entities will not provide tests or services based on Routine Orders.

B. Auditing and Monitoring

Audit Services will audit adherence to this policy. In addition, the validation of order for outpatient tests and services is included in the Medical Billing Audit process (See Regulatory Compliance Policy COMP-RCC 4.46 Medical Billing Audit).

C. Responsible Person

Each Director of an Outpatient Tests or Services department is responsible for ensuring that all individuals adhere to the requirements of this policy; that these procedures are implemented and followed at the Tenet Entity, and that instances of noncompliance are reported to the Compliance Officer.

D. Enforcement

All employees whose responsibilities are affected by this policy are expected to be familiar with the basic procedures and responsibilities created by this policy. Failure to comply with this policy will be subject to appropriate performance management pursuant to all applicable policies and procedures, up to and including termination. Such performance management may also include modification of compensation, including any merit or discretionary compensation awards, as allowed by applicable law.

VI. REFERENCES:

- [Regulatory Compliance policy COMP-RCC 5.01 Orders for Outpatient Tests and Services](#)
- [Regulatory Compliance policy COMP-RCC 5.07 Protocol Orders](#)
- [Regulatory Compliance Policy COMP-RCC 4.46 Medical Billing Audit](#)
- [Centers for Medicare and Medicaid Services, State Operations Manual Appendix A - Survey Protocol, Regulations and Interpretive Guidelines for Hospitals, Interpretive Guidelines §482.24\(c\)\(1\) and \(2\)](#)