	Regulatory Compliance Policy	No. 5.02 COMP-RCC
	Title:	**Page:** 1 of 4
	OUTPATIENT LABORATORY REQUISITIONS	**Effective Date:** 11-19-15
		Previous Versions Dated: 09-27-11; 05-15-11; 01-01-11
		Corporate Review Dated: 07-18-19

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 entities (each, a "Tenet Entity") (collectively, "Tenet").

II. PURPOSE:

The purpose of this policy is to establish the required elements for outpatient laboratory requisitions for Tenet Entities providing outpatient reference laboratory services.

III. DEFINITIONS:

A. "**Physician**" means, in the context of this policy, a medical doctor or any licensed independent practitioner who is authorized by state law to order tests or services and/or is legally accountable for establishing the patient's diagnosis.

B. "**Outpatient Laboratory Requisition**" means a written document listing outpatient tests that are available for Physicians to order. It can serve as evidence of the services the Physician 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 Physician's intent if all of the required elements are present.

C. "**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 Tenet Entity Medical/Professional Staff bylaws.

D. "**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 Physician 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/Professional 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 Physician but does not imply there can be an automatic, linked or exploding condition in the information system to automatically order a test.

E. "**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.)

F. "**Qualified Individuals**" mean those persons qualified by specific state laws, rules and regulations and Tenet Entity policies and Medical/Professional Staff bylaws to accept verbal orders for outpatient tests or services.

G. "**Routine Orders**" describe tests that always are performed on each and every patient without documentation of a Physician's order and that are not specific to the patient (e.g., Comprehensive Metabolic Profile on all pre-op patients). Tenet Entities will not provide tests or services based on Routine Orders.

H. "**Standing Orders**" mean those orders used for patients with specific conditions who require regular and repeated testing or services. (See Regulatory Compliance policy COMP-RCC 5.05 Standing Orders.)

I. "**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.[1] (See Regulatory Compliance policy COMP-RCC 5.01 Orders for Outpatient Tests and Services.)

IV. POLICY:

Tenet Entities must use outpatient laboratory requisition forms that contain the following elements:

- patient name or other unique identifier. Note that use of the entire patient social security number is discouraged;
- name and telephone number of Physician ordering the test;
- name and/or CPT code of test being ordered. Using both the name and CPT code is strongly preferred;
- patient's ICD-10-CM diagnosis code(s) or a narrative of the patient's diagnosis;
- date of specimen collection;[2]

[1] 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)

[2] See Clinical Laboratory Improvement Act (CLIA) implementing regulations, including 42 CFR 493.1232 Standard: Specimen identification and integrity, and 42 CFR 493.1241 Standard: Test request, which requires date, and if possible, time of specimen collection.

- additional information relevant and necessary to the test to assure accurate and timely testing and reporting of results as determined by the Tenet Entity;
- the signature of a representative from the Physician's practice, except in states where state law requires the Physician's signature; and
- statement that Medicare generally does not cover routine screening tests.

Test menus may vary by Tenet Entity and physician, as needed. Each Tenet Entity must review its outpatient requisition forms annually or more frequently, as needed.

V. PROCEDURE:

A. Tenet Entity Implementation

1. Each Tenet Entity must ensure all outpatient laboratory requisitions, whether paper-based or generated through web-based physician portals, meet the requirements of this policy.
2. Every effort should be made to obtain all information prior to tests being performed or services being rendered. However, if patient care or the integrity of a specimen is at risk, the testing/service department should continue processing the test(s) or performing the service(s) and will subsequently obtain required elements.
3. If a Tenet Entity receives a signed request for lab services on another healthcare service provider's laboratory requisition, the Tenet Entity may perform the tests or services only if the Tenet Entity first confirms with the ordering Physician or the patient that the tests or services may be performed by the Tenet Entity and documents the conversation on the other healthcare service provider's laboratory requisition.
4. Each Tenet Entity must have a process in place to ensure Physicians are notified of the requirements of this policy. The process may be included in the annual notice to Physicians required by Regulatory Compliance policy COMP-RCC 5.09 Laboratory Annual Notice to Physicians.

B. Auditing and Monitoring

Audit Services will audit adherence to these policies.

C. Responsible Person

The Laboratory Director 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 the non-adherence 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 5.05 Standing Orders

- Regulatory Compliance policy COMP-RCC 5.07 Protocol Orders

- Regulatory Compliance policy COMP-RCC 5.09 Laboratory Annual Notice to Physicians

- 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)

- Clinical Laboratory Improvement Act (CLIA) and its implementing regulations, including 42 § 493.1241

VII. ATTACHMENTS:

- Attachment A: Model Outpatient Laboratory Requisition Template