



DEPARTMENT OF HEALTH & HUMAN SERVICES

Centers for Medicare & Medicaid Services

7500 Security Boulevard
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DATE: October 10, 2002

FROM: Director
Survey and Certification Group
Center for Medicaid and State Operations

SUBJECT: Change in requirement for signed physician's order for influenza and pneumonia vaccine

TO: Associate Regional Administrator, DMSO
State Survey Agency Directors

The purpose of this program memorandum is to provide information and guidance to regional offices, and state survey agency personnel regarding a new regulation that will remove the federal barrier requiring nursing home providers, home health agencies and hospitals to have individually signed physician's order for influenza and pneumococcal vaccines.

The Survey Procedures and Interpretive Guidelines for Long Term Care Facilities, Home Health Agencies and Hospitals require physicians to sign and date all orders. The new regulation allows nursing home providers, home health agencies and hospitals to adopt strategies to increase influenza and pneumonia vaccination rates such as institution or physician-approved protocols i.e., standing orders, that do not require individually signed physician orders. Accordingly, surveyors should not be citing providers that have adopted standing orders for influenza and pneumococcal vaccinations for the failure to have individually signed physician orders.

As a result of this issuance, effective immediately CMS is altering the guidance to states and regions. For long term care facilities, physicians must sign and date all orders with the exception of influenza and pneumococcal polysaccharide vaccines, which may be administered per physician-approved facility policy after an assessment for contraindications. For home health agencies, drugs and treatments are administered by agency staff only as ordered by the physician with the exception of influenza and pneumococcal polysaccharide vaccines, which may be administered per agency policy developed in consultation with a physician and after an assessment for contraindications. For hospitals, all orders for drugs and biologicals must be in writing and signed by the practitioner or practitioners responsible for the care of the patient as specified under §482.12(c) with the exception of influenza and pneumococcal polysaccharide vaccines, which may be administered per physician approved hospital policy after an assessment for contraindications.

CMS is supportive of practices of that improve influenza and pneumococcal immunization coverage in long-term care facilities.

Regional offices and state survey agencies should encourage nursing home facilities to provide residents with the opportunity to receive influenza and pneumococcal vaccinations.

Effective date: This guidance is effective immediately.

Training: This memorandum should be shared with all survey and certification staff, surveyors, their managers, and the state/regional training coordinators.

/s/

Steven A. Pelovitz