



Collaborative Patient Care is a Provider Partnership

What's Changed?

We reorganized the layout and made these changes:

- Revised the title
- Added a bullet about quality of care on page 2
- Added a note telling providers that other coverage and payment rules may apply
- Added the Supplemental Medical Review Contractor to the list of Medicare claims audit contractors
- Added a bullet clarifying that your patient may pay additional costs if documentation is incomplete
- Added language to emphasize that all partnering providers must have necessary information and documentation
- Deleted the list of medical directors at the end of the fact sheet

You'll find substantive content updates in dark red font.

Introduction

As a physician, supplier, or other health care provider, you may need to partner with other providers when treating your Medicare-covered patients by:

- Writing orders
- Making referrals
- Requesting health care services or items for your patient

It's important to understand the Medicare coverage criteria that apply (for example, medical necessity) and documentation guidelines for those services or items. This helps to ensure:

- **Quality care for your patient**
- Accurate and timely processing and payment of:
 - Your claims
 - The claims of other providers or suppliers who provide services or items for your patient

Other providers or suppliers may need your documentation or certification supporting the medical necessity of the services or items they provide based on your referral or order.

Note: This fact sheet is limited to information and documentation you need to support medical necessity when you partner with other providers. Other coverage and payment rules may also apply.

Background

[Title XVIII of the Social Security Act, Section 1862 \(a\)\(1\)\(A\)](#) says “No payment may be made under Part A or Part B for expenses incurred for items or services which...are not reasonable and necessary for the diagnosis or treatment of illness or injury or to improve the functioning of a malformed body member...”

To make sure it pays claims properly, Medicare conducts claims audits through its:

- Medicare Administrative Contractors (MACs)
- Recovery Audit Contractors (RACs)
- Comprehensive Error Rate Testing (CERT) program
- Supplemental Medical Review Contractor (SMRC)

These audits frequently show that available documentation and provider medical records don't provide enough information to establish medical necessity by justifying an item or service you ordered.

If your documentation is incomplete:

- Medicare may not pay for the services or items you ordered or requested
- Your patient may have to pay additional costs

Also, if you don't provide enough information to support medical necessity when you make referrals or write orders, the other provider or supplier may delay or deny care to your patient.

Share Information with Your Partners

Other providers or suppliers may need your documentation or certification supporting the medical necessity of the services or items they provide based on your referral or order.

[Section 1842\(p\)\(4\) of the Social Security Act](#) requires the cooperation of all providers of services or items to supply the necessary documentation and information. It states in part:

[i]n case of an item or service...ordered by a physician or a practitioner...but furnished by another entity, if the Secretary (or fiscal agent of the Secretary) requires the entity furnishing the item or service to provide diagnostic or other medical information in order for payment to be made to the entity, the physician or practitioner shall provide that information to the entity at the time that the item or service is ordered by the physician or practitioner.

When you partner with another provider, be sure you both have all the information you need and you document everything needed to meet Medicare payment requirements.

- When you write orders or make referrals to another provider, be sure to include all the necessary diagnostic or other medical information to support medical necessity
- If you provide services or items based on an order or referral from another provider, be sure you get the necessary diagnostic or other medical information to support medical necessity

[The Health Insurance Portability and Accountability Act \(HIPAA\) Privacy Rule](#) allows you to disclose protected health information without patient authorization to other health care providers also covered under the HIPAA rule to carry out treatment, payment, or health care operations. You can't charge for furnishing requested documentation to another health care provider. And, it's not a HIPAA violation, provided you need to furnish the information for patient treatment, payment, or health care operations.

What to Document

You need to provide thorough and accurate documentation to support medical necessity for services or items you provide or order. The documentation should give a thorough picture of what happened during the patient's visit and why services or items you ordered or gave are medically necessary.

Documentation Supporting Medical Necessity must be complete, legible, and include, at a minimum:

- Name of person providing the services or items
- Date of services or items
- Patient's signs and symptoms supporting the need for the services or items
- Details of the services provided or items supplied
- Where you provided services or items
- Signed orders for services or items and the clinical rationale for the orders
- Rationale for the level of care given

- Intensity, frequency, duration, and scope of services
- Legible signature of the person providing the service and the physician ordering and approving treatment plans (if signature isn't legible, include a signature log showing name in print and signature)

Resources

- [CMS Internet Only Manuals, especially the Medicare Benefit Policy Manual, the Medicare Claims Processing Manual, and the Medicare Program Integrity Manual](#)
- [CMS Medicare Learning Network® \(MLN\)](#)
- [Complying with Medical Record Documentation Requirements](#) (MLN fact sheet)
- [MAC websites](#)

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