

# Medicaid-Compliant Written Orders

April 19 & 20, 2021

## Questions & Answers

Some answers refer to the [Medicaid Q&A](http://www.oms.nysed.gov/medicaid/), which can be found <http://www.oms.nysed.gov/medicaid/>.

Topic/Category	
<b>TIMING FOR SPEECH REFERRALS</b>	
<b>Q</b>	Can an SLP write a speech referral prior to the initial session based on an evaluation report?
<b>A</b>	No. Please see Medicaid <b>Q&amp;A # 94...</b>  Q. Can a NYS licensed and currently registered speech-language pathologist (SLP) who has not seen the student write a referral for speech therapy?  A. No. <b>The SLP cannot write a referral if they have not seen the student.</b> 18 NYCRR 505.11 states that a written order must contain a diagnostic statement and purpose of treatment. It is not acceptable under the Medicaid program for the ordering or referring professional never to have met with the child as it is incompatible with the obligations of the ordering practitioner to assure that the ordered care, services, or supplies will meet the recipient's needs and restore him or her to the best possible functional level. [December 13, 2010]
<b>Q</b>	Can the SLP that evaluated the child write the script for services before the initial session?
<b>A</b>	Yes. Because they have already seen the child.
<b>Q</b>	Can a qualified SLP working as the director of speech services for the agency, sign all speech referrals for the agency?
<b>A</b>	Only if the individual signing the speech referral has seen that child.
<b>TERM OF SERVICE</b>	
<b>Q</b>	If the child starts services in September (not July), what would the term of service be?
<b>A</b>	The term of service can be written to specify the entire school year. Since the dates of service are “within” the school district fiscal year, using 7/1/21 – 6/30/22 is perfectly acceptable. Refer to Medicaid <b>Q&amp;A #34</b> .
<b>Q</b>	When doing an evaluation, is it acceptable to put 7/1/2020 through 6/30/2021 as the term of service?

A	If the evaluation falls within that school year, it is acceptable to use those dates. The dates must always contain the year. Refer to Medicaid <b>Q&amp;A #34</b> .
<b>WHEN IS A NEW SCRIPT REQUIRED?</b>	
Q	If a child has an annual review meeting and is approved for PT 1x30 I for the summer and PT 2x30 I for the winter session and both are included within the IEP, are two prescriptions required? One for each session?
A	As long as both the summer and winter sessions are included in the original IEP when it was developed, one script can cover the entire year. If the separate frequency for the 10 month was due to a change in the IEP and a new IEP was developed, then a new written order is required.
Q	If a child changes from one agency to another mid-year, does the new agency need a new prescription?
A	If the child remained in the same district and there was no change to the frequency/duration, the new agency would be able to use the previous prescription as long as the prescription did not expire.
Q	Is a new prescription required if the educational program changed, but the related services did not change?
A	As long as the related service did not change and the prescription has not expired, the prescription can be used with the new education program.
Q	Do you need a new prescription if the location of services changes (i.e., therapy room to classroom) and the frequency/duration remains the same?
A	A new prescription is not required for a change in location.
Q	Is a new prescription required if the child's school district is incorrect?
A	The child's school district and county are optional fields on the prescription. They are not required for Medicaid. If the prescription is valid (not expired) and the frequency/duration have not changed, the prescription is valid.
Q	If the prescription references the frequency/duration "as per the IEP," and the summer and winter sessions have a different frequency/duration, is a prescription required for each session or will one prescription cover both sessions?
A	As long as both the summer and winter sessions are included in the original IEP when it was developed, one script can cover the entire year. If the separate frequency for the 10 month was due to a change in the IEP and a new IEP was developed, then a new written order is required.

**PRESCRIPTION TEMPLATE**

Q	If a doctor writes the prescription from their prescription pad and not the county prescription template, is that acceptable? Can we add the term of service if it is missing?
A	If the doctor uses their prescription pad and all eight required items are present and readable on the prescription, the prescription will be valid for Medicaid purposes. Original prescriptions cannot be altered. The physician would need to supply a new written order with the term of service added.

**CORRECTIONS TO THE PRESCRIPTION**

Q	If a doctor makes a correction to the prescription, does the doctor need to re-date the correction or just cross out and initial?
A	Medicaid <b>Q&amp;A 133</b> states that the correct way to correct Medicaid documentation is to cross out the incorrect information and initial the change. The only person that can make this correction is the ordering practitioner. If the prescription was missing information, a new prescription must be obtained. Original Prescriptions cannot be altered. See Medicaid <b>Q&amp;A 114</b> .

**NPI/LICENSE #**

Q	If the doctor listed both the license and NPI number on the prescription and one was incorrect, is it still valid?
A	As long as there is a correct/valid NPI or License number on the prescription, it is valid.

**ELECTRONIC SIGNATURES**

Q	Please clarify what an acceptable electronic signature is.
A	Medicaid <b>Q &amp; A 129 and 130</b> list all the criteria required for an electronic signature. What is not acceptable are methods that do not guarantee that the electronic signature was affixed by the ordering provider themselves. These include methods such as: 1) Signature stamps, 2) An image of a signature pasted on a document, 3) A font substitution on a document, etc.

**MISCELLANEOUS**

Q	Is a faxed copy of the child's prescription acceptable?
A	Yes.
Q	If the doctor uses a speech related ICD-10 code, is it valid for OT/PT?
A	The doctor is the appropriate person to determine the correct diagnosis code for the child.
Q	If the prescription is found not valid for Medicaid billing, can the prescription be entered into the Portal so the service can be billed?
A	If you receive a non-compliant Medicaid prescription, a replacement prescription should be requested as soon as possible.
Q	Can service begin while a doctor's prescription is being corrected?

A	A doctor's prescription cannot be corrected. A replacement prescription should be requested. If the non-compliant Medicaid prescription meets the requirements to treat (as per the clinician's license), they can treat the child until the replacement Medicaid-compliant prescription is received. For each session that was provided without a Medicaid-compliant prescription, the session note should be marked as "not eligible for Medicaid."
Q	If there is a line or dark border on the side of a prescription, but does not affect the information, does it need to be re-uploaded?
A	As long as all the information on the prescription is readable and all eight required items are completed in accordance with Medicaid, the prescription will be valid for Medicaid purposes.