

Signature Requirements

This publication is a joint collaboration between CGS and Noridian to assist suppliers in identifying typical signature requirements needed on documentation submitted to the DME MACs. These are common situations and do not reflect all possible signature requirements. The CMS Medicare Program Integrity Manual Publication 100-08, Chapter 3, Section 3.3.2.4 is the reference for these requirements.

Medicare requires services that are provided/ordered be signed/authenticated by the author. The method used shall be a handwritten or electronic signature. Stamped signatures are not generally acceptable (see note for exceptions). Medicare utilizes signatures to determine the identity and credentials (e.g. MD, RN, etc.) of the signatory. For this reason, records produced by physicians or other practitioners involved in the patient care must be signed and dated by the author.

Notes that have been transcribed must be reviewed and signed by the author of those notes. 'Signature on file' is not acceptable in medical records and does not constitute a valid electronic signature.

Handwritten, Electronic & Digitized Signatures

A **handwritten signature** (i.e. pen and ink signature) is a mark or sign by an individual on a document signifying knowledge, approval, acceptance or obligation.

An **electronic signature** is a mark or sign by an individual on a document signifying knowledge, approval acceptance or obligation that has been generated through computerization. This type of signature should contain the date, time stamp, an indication the document is being signed electronically, the practitioner's name, and preferably a professional designation.

Digitized signatures are electronic images of a person's handwritten signature reproduced in its identical form using a pen tablet. It is an actual real time signature done electronically. This method is typically generated by special encrypted software that allow for sole usage.

Rubber Signature Stamps are not usually acceptable. CMS would permit the use of a rubber stamp for signature in accordance with the Rehabilitation Act of 1973.

References: CMS Program Integrity Manual (PIM) 100-08 Chapter 3, section 3.3.2.4
Signature Guidelines for Medical Review Purposes- MM6698
Use of a Rubber Stamp for Signatures- MM8219

Affordable Care Act (ACA 6407) Orders & Signatures

For any of the items affected by ACA 6407 requirements to be covered by Medicare, a written, signed and dated order must be received by the supplier prior to delivery of the item and after the face-to-face encounter. The prescribing practitioner's signature and date of the practitioner's signature, personally entered by that individual, must be present on the order prior to delivery of the WOPD to be considered valid.

Reference: Detail Written Orders and Face-to-Face Encounters – MM8304



Signature on Orders

Written dispensing orders require a prescribing practitioner's signature and **verbal dispensing orders** require the DME supplier's signature.

Detailed Written Orders (DWO) and Written Orders Prior to Delivery (WOPD) with handwritten signatures shall have handwritten dates of signatures, and electronic signatures shall have electronic dates of signatures. This is used as a means to verify that the prescribers personally enter their signatures and dates.

Reference: PIM 100-08 Chapter 5, sections 5.2.5 & 5.2.6

Certificate of Medical Necessity (CMNs) & DME MAC Information Forms (DIFs)

CMNs – Practitioners are required to personally input their signatures and signature dates in section D of applicable CMNs. By signing and dating the CMN, the practitioner is indicating agreement with all entered information.

DIFs – DME suppliers are required to sign DIF forms when applicable. DIFs are completed entirely by the supplier and do not require a physician's signature.

Proof of Delivery

Medicare beneficiaries or their designees are required to review proof of delivery documents and provide a signature, which signifies knowledge, approval and acceptance of the delivery. Proof of delivery documentation must include the date of delivery. This date may be entered by the beneficiary, their designee or the DME supplier.

Reference: PIM 100-08 Chapter 4, section 4.26.1

Advance Beneficiary Notices (ABN)

The ABN issued by the supplier must be signed and dated by the beneficiary or representative prior to delivery.

References: Medicare Claims Processing Manual 100-04 Chapter 20, section 120 & Chapter 30, Section 50

