

We recently issued the following clarification on the use of Blackberry® or email to document the rehabilitation physician's review and concurrence with the required preadmission screening for IRF services:

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As we have said in the "Series 1" clarifications that are available on the "Coverage Requirements" page of the IRF PPS website at <http://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/InpatientRehabFacPPS/Coverage.html>:

"A rehabilitation physician must review and concur with the findings and results of the preadmission screening after the screening has been completed and prior to the IRF admission. By concurrence, we mean that the rehabilitation physician must either sign and date the original document or, if reviewing from an off-site location, sign and date a copy of the document and fax it to the IRF. This may be done either on the preadmission screening form itself or on a separate document or electronically, as long as it is done prior to the IRF admission."

Efforts are currently underway at CMS to develop overall policies for the use of electronic signatures (e-signatures) for Medicare transactions. Until such efforts are completed and new policies have been established, we cannot allow the preadmission screening concurrence to be documented through any other means except as a signature on the original document or on a copy of the document that is faxed to the IRF.

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Subsequent to the posting of this clarification, we have received additional questions about the use of a closed electronic medical record system to generate the preadmission screening documentation and to document the rehabilitation physician's review and concurrence with this information. As we understand it, these systems enable the preadmission screening documentation to be generated entirely electronically. Then, when the preadmission screening documentation is completed, the rehabilitation physician logs into the system with his or her own password, reviews all of the information, and designates with an electronic signature (that also has a date and time stamp) that he or she has reviewed and concurs with the preadmission screening documentation.

As described above, such closed electronic medical record systems are an acceptable means of documenting the rehabilitation physician's review and concurrence with the preadmission screening. In contrast to the transmittal of documents through Blackberry® or email, closed electronic medical record systems provide two levels of assurance that we believe are critical for ensuring the integrity of the process:

1. They ensure the security of personally identifiable information (PII), as required under the Health Insurance Portability and Accountability Act of 1996 (HIPAA, Title II), and
2. They tie the preadmission screening information together with the rehabilitation physician's documentation of his or her review and concurrence with the information, rather than allowing the two pieces of information to be separate and disconnected.

When CMS completes the development of Medicare's formal electronic signature policies, we may need to revise or further clarify this guidance to ensure that it is in accordance with those policies.

