

DEPARTMENT OF HEALTH AND HUMAN SERVICES
Centers for Medicare & Medicaid Services



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Medicare Signature Requirements - Educational Resources for Health Care Professionals

Note. We revised this article on June 25, 2020, to delete links to obsolete products. All other information is the same.

Provider Types Affected

This MLN Matters® Special Edition Article is for all Medicare Fee-For-Service (FFS) physicians, non-physician practitioners, providers, suppliers, and other health care professionals who order or provide Medicare-covered services to Medicare beneficiaries.

Provider Action Needed



STOP – Impact to You

Medicare requires that services provided/ordered be authenticated by the author. The method used should be a handwritten or electronic signature. Under certain circumstances, a rubber stamped signature is acceptable. If you do not have an acceptable signature on services provided/ordered, your Medicare payment may be impacted.

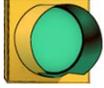


CAUTION – What You Need to Know

Medicare services provided/ordered must be authenticated by the author using an acceptable signature.

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GO – What You Need to Do

Use this article as a reference to available educational resources related to signature requirements for Medicare-covered services.

Educational Products for Health Care Professionals

The Medicare Learning Network® (MLN) offers a variety of educational products to help you understand signature requirements for Medicare-covered services.

1. Medicare Quarterly Compliance Newsletter

- The [Medicare Quarterly Provider Compliance Newsletter \(January 2014\)](#) highlights Comprehensive Error Rate Testing (CERT) circumstances as a result of insufficient documentation.

2. Articles

- [MM5971](#): “**CR 5550 Clarification – Signature Requirements**” clarifies the instructions on signature requirements for the certification of terminal illness for hospice. It states that Medicare contractors will accept a facsimile of an original written or electronic signature in documenting the certification of terminal illness hospice.
- [MM6100](#): “**Physician Signature Requirements for Diagnostic Tests**” notes that a physician’s signature is not required on orders for clinical diagnostic tests that are paid on the basis of the clinical laboratory fee schedule, the Medicare physician fee schedule, or for physician pathology services. While a physician order is not required to be signed, the physician must clearly document in the medical record his or her intent that the test be performed.
- [MM6261](#): “**Signature and Date Stamps for DME Supplies – Certificates of Medical Necessity (CMNs) and DME MAC Information Forms (DIFs)**” alerts providers that the Centers for Medicare & Medicaid Services (CMS) has issued instructions regarding signature requirements for CMNs and DIFs. It states signature and date stamps are not acceptable for use on CMNs and DIFs. Medicare contractors will only accept hand written, facsimiles of original written and electronic signatures and dates on medical documentation for medical review purposes on CMNs and DIFs.
- [MM6698](#): “**Signature Guidelines for Medical Review Purposes**” outlines the new rules for signatures and adds language of E-Prescribing beginning on or after April 16, 2010. The article covers signature logs and attestation statements. A helpful table summarizing examples where signature requirements are met

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and/or a Medicare contractor may contact the provider to determine if the provider wishes to submit a signature log or attestation statement.

- [MM7337](#): **“Hospice Benefit Policy Manual Update: New Certification Requirements and Revised Conditions of Participation”** states, if the narrative is part of the certification or recertification form it must be located immediately above the physician’s signature. If the narrative is an addendum to the form, (in addition to the physician’s signature on the certification or recertification form) the physician must also sign immediately following the narrative in the addendum. In addition, it must include a statement directly above the physician’s signature attesting that (by signing), the physician confirms that he/she composed the narrative based on his/her review of the patient’s medical record or, if applicable, his or her examination of the patient.
- [MM8219](#): **“Use of Rubber Stamp for Signature”** highlights the exception for the use of rubber stamps in accordance with the Rehabilitation Act of 1973 in the case of the author with a physical disability that can provide proof to a CMS contractor of his/her inability to sign their signature due to their disability. Under this circumstance, by affixing the rubber stamp, the provider is certifying that they have reviewed the document.
- [SE1219](#): **“A Physician’s Guide to Medicare’s Home Health Certification, including the Face-to-Face Encounter”** includes a short section on signature requirements for face-to-face documentation.
- [SE1308](#): **“Physicians Delegation of Tasks in Skilled Nursing Facilities (SNFs) and Nursing Facilities (NFs)”** addresses the authority of nurse practitioners (NPs), physician assistants (PAs), and clinical nurse specialists (CNSs) to sign orders, certification, and recertification in SNFs and NFs.
- [SE1405](#): **“Documentation Requirements for Home Health Prospective Payment System (HH PPS) Face-to-Face Encounter”** notes that the homebound status of the patient and his/her need for skilled services must be written in a brief narrative, signed by a physician, titled “Home Health Face-to-Face Encounter”, and dated.

3. Fact Sheets:

- [ICN 905063](#): **“Power Mobility Devices: Complying with Documentation and Coverage Requirements”** discusses the need for a signature on both the prescription and the detailed product description from the supplier by the treating physician.

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- [ICN 905364](#): “**Complying With Medicare Signature Requirements**” provides answers to questions, as well as a list of resources, about Medicare signature requirements.
- [ICN 905064](#): “**Continuous and Bi-Level Positive Airway Pressure (CPAP/BPAP) Devices: Complying with Documentation and Coverage Requirements**” states the order/prescription must be signed by the treating physician who ordered the device. The description may be written by someone else, but the treating physician must sign the order.

Additional Information

To review detailed Medicare signature requirements read Chapter 3 of The “Medicare Program Integrity Manual” located at <http://www.cms.gov/Regulations-and-Guidance/Guidance/Manuals/Downloads/pim83c03.pdf> on the CMS website.

For more information about provider compliance, visit <http://www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNProducts/ProviderCompliance.html> on the CMS website.

Document History

- June 25, 2020 – Article revised to delete links to obsolete products.
- July 7, 2014 –Initial article issued.

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