

MLN Matters Number: MM6261 **Revised**      Related Change Request (CR) #: 6261

Related CR Release Date: December 31, 2008      Effective Date: February 2, 2009

Related CR Transmittal #: R281PI      Implementation Date: February 2, 2009

## Signature and Date Stamps for DME Supplies-Certificates of Medical Necessity (CMNs) and DME MAC Information Forms (DIFs)

Note: This article was revised on April 10, 2018, to update Web addresses. All other information remains the same.

### Provider Types Affected

This article is intended for providers and suppliers submitting claims, CMNs, or DIFs to Medicare contractors (carriers, DME Medicare Administrative Contractors (DME MACs), Fiscal Intermediaries (FIs), Part A/B Medicare Administrative Contractors (A/B MACs), and/or Regional Home Health Intermediaries (RHHIs)) related to durable medical equipment, prosthetic, and orthotic supplies (DMPEOS) provided to Medicare beneficiaries.

### Provider Action Needed

This article is based on Change Request (CR) 6261 and alerts providers that the Centers for Medicare & Medicaid Services (CMS) has issued instructions regarding signature requirements for CMNs and DIFs. **Signature and date stamps are not acceptable** for use on CMNs and DIFs. Be sure your billing staffs are aware of this change. Your Medicare contractors will accept only hand written, facsimiles of original written and electronic signatures and dates on medical record documentation for medical review purposes on CMNs and DIFs.

### Background

CMNs and DIFs are forms used to determine if the medical necessity and applicable coverage criteria for durable medical equipment, prosthetic, and orthotic supplies (DMPEOS) have been met. "The Program Integrity Manual (PIM)", Chapter 3, Section 3.4.1.1, which may be reviewed at <http://www.cms.gov/Regulations-and-Guidance/Guidance/Manuals/Downloads/pim83c03.pdf> on the CMS website, states that Medicare requires a legible identifier for services provided/ordered. The **method used should**

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**be hand written including facsimiles of original written or an electronic signature in accordance with Chapter 3, Section 3.4.1.1** to sign an order or other medical record documentation for medical review purposes. Signature and date stamps are not acceptable for use on CMNs and DIFs.

### **Additional Information**

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If you have questions, please contact your Medicare contractor at their toll-free number which may be found at <http://www.cms.gov/Research-Statistics-Data-and-Systems/Monitoring-Programs/provider-compliance-interactive-map/index.html>.

For complete details regarding this Change Request (CR) please see the official instruction (CR6261) issued to your Medicare A/B MAC, DME/MAC, Carrier, FI or RHHI. That instruction may be viewed by going to <http://www.cms.gov/Regulations-and-Guidance/Guidance/Transmittals/downloads/R281PI.pdf>.

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## Document History

Date of Change	Description
April 10, 2018	This article was revised to update Web addresses.
July 6, 2013	This article was revised to add a reference to <a href="#">MM8219</a> to inform you of an exception to the prohibition on use of rubber signature stamps.
January 2, 2009	Initial article released

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