



CMS SIGNATURE REQUIREMENTS

Medicare requires that healthcare providers ordering or documenting the medical necessity for items or services received by Medicare beneficiaries must be identifiable. This is generally accomplished through a handwritten or electronic signature (signature stamps are not acceptable); however, when the author of a record is unclear, document(s) must be authenticated before payment can be made. The following information outlines the guidance from the Centers for Medicare & Medicaid Services (CMS) regarding acceptable methods for authentication provided/ordered be authenticated by the author.

Effective for all post-payment and prepayment claims subject to medical review on or after April 16, 2010, CGS will include signature authentication in the review of claims developed for additional documentation. This process will follow the guidelines outlined in the *CMS Pub. 100-08, Medicare Program Integrity Manual* (<https://www.cms.gov/Regulations-and-Guidance/Guidance/Manuals/Downloads/pim83c03.pdf>), Chapter Three – Section 3.3.2.4 for additional information concerning signature requirements.

Therefore, when responding to a request for additional documentation from the DME MAC or other Medicare contractor, suppliers are encouraged to review their documentation before submission to ensure that all records for services and orders are signed appropriately. Requests for documentation from CGS Medical Review now includes language notifying suppliers of their options for authenticating signatures. Suppliers should refer to the following chart for examples of signatures that do and do not meet CMS requirements.

	Signature Requirement Met?
Legible full signature	YES
Legible first initial and last name	YES
Illegible signature over a typed or printed name	YES
<div style="display: flex; align-items: center;"> <div style="border-right: 1px dashed black; padding-right: 10px;"> <p>Example:  John Whigg, MD</p> </div> </div>	
Illegible signature where the letterhead, addressograph or other information on the page indicates the identity of the signatory.	YES
<p>Example: An illegible signature appears on a prescription. The letterhead of the prescription lists 3 physicians' names. One of the names is circled.</p>	
Illegible signature NOT over a typed/printed name and NOT on letterhead, but the submitted documentation is accompanied by:	YES
<ol style="list-style-type: none"> 1. a signature log, or 2. an attestation statement 	
Initials over a typed or printed name	YES
Initials NOT over a typed/printed name but accompanied by:	YES
<ol style="list-style-type: none"> 1. a signature log, or 2. an attestation statement 	
Unsigned handwritten note where other entries on the same page in the same handwriting are signed.	YES
Illegible signature NOT over a typed/printed name and NOT on letterhead, and the submitted documentation is Unaccompanied by:	NO
<div style="display: flex; align-items: center;"> <div style="border-right: 1px dashed black; padding-right: 10px;"> <ol style="list-style-type: none"> 1. a signature log, or 2. an attestation statement </div> <div style="padding-left: 10px;"> <p>Example: </p> </div> </div>	

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	Signature Requirement Met?
Initials NOT over a typed/printed name and Unaccompanied by: <ol style="list-style-type: none"> 1. a signature log, or 2. an attestation statement 	NO
Unsigned typed note with provider's typed name	Example: _____ John Whigg, MD NO
Unsigned typed note without providers typed/printed name	NO
Unsigned handwritten note, the only entry on the page	NO
"signature on file"	NO

The medical records provided should also include patient identification and date of service.

If a medical record is missing the author's signature or the signature is illegible, a late signature (beyond the short delay that occurs during the transcription process) should not be added to the record. The supplier should instead request that the physician or other clinician submit either a signature log or a signature attestation statement. Refer to *CMS Pub. 100-08, Medicare Program Integrity Manual* (<https://www.cms.gov/Regulations-and-Guidance/Guidance/Manuals/Downloads/pim83c03.pdf>), Chapter Three – Section 3.3.2.4 for additional information about signature logs and attestation statements.

When reviewing a claim, reviewers will not proceed with signature authentication if there are reasons to deny the claim that are unrelated to signature requirements. However, if the criteria in the relevant Medicare policy cannot be met but for a key piece of medical documentation which contains a missing or illegible signature, the reviewer will proceed to a signature assessment.

If the signature assessment reveals that an order is missing a signature, the order will be disregarded. In the event that the author's signature is missing from a medical record or is illegible on an order or medical record, the DME MAC will contact the supplier (either via letter or telephone) and request that the supplier provide a signature log or attestation statement. The log or attestation is due 20 days from the date of the letter or telephone contact. Failure to respond to this request may result in a claim denial.

CGS has developed a Signature Attestation Statement (JC: https://www.cgsmedicare.com/jc/forms/pdf/jc_cms_signature_req.pdf; JB: https://www.cgsmedicare.com/jb/forms/pdf/jb_cms_signature_req.pdf) form that suppliers may use if they desire. However, CMS and CGS are neither requiring nor instructing suppliers to use this form or format.