

Part B Insider (Multispecialty) Coding Alert

PHYSICIAN NOTES: CMS Clarifies Hospice Signature Requirements

Also: Get advice from Medicare to discover differences between payment review programs

You may be aware that stamped signatures are forbidden when documenting a hospice provider's signature -quot; but CMS now clarifies its stance on another confusing documentation topic -quot; the faxed signature.

In MLN Matters article MLN5971, with an April 28 implementation date, CMS notes that Medicare has often maintained that the only legible identifiers it accepts for services provided or ordered by hospices must be generated using a written or electronic signature. But, the article notes, CMS now allows an exception to this requirement.

-A facsimile of an original written or electronic signature is acceptable for the certification of terminal illness for hospice,- the article states. -Please be sure to note, however, that while a signature facsimile is acceptable in this instance, it and hard copies of a physician's electronic signature- must remain in the patient's record.

The MLN Matters article is available at www.cms.hhs.gov/MLNMattersArticles/downloads/MM5971.pdf.

In other news -

Have you confused NCCI, MUE and CERT with one another? If this alphabet soup has you stumped, CMS created a new product for you.

The new 16-page document, -Medicare Claim Review Programs: MR, NCCI Edits, MUEs, CERT, and RAC- offers a just-the-facts primer on Medicare's pre- and post-payment claims review systems.

Featuring simple descriptions of each program and frequently asked questions (FAQs) on a few of them, you might want to bookmark this page for future reference.

The document is available at www.cms.hhs.gov/MLNProducts/downloads/MCRP_Booklet.pdf.

Many practices cried foul at CMS's 60-day limit on substitute physician billing for those doctors who were called to active duty in the armed forces. CMS rights those ills with a new policy extending that limit by six months, according to MLN Matters article MM5985, with a May 5 implementation date.

-This means that a physician who is called to active duty may continue to bill for substitute physician services furnished from Jan. 1, 2008, through June 30, 2008, which may be beyond the 60-day limit,- the article says.

The MLN Matters article is available at www.cms.hhs.gov/MLNMattersArticles/downloads/MM5985.pdf.