



COVID-19 FAQ

2. Do the current Medicare patient signature rules remain in effect, have they been relaxed, and can we cease obtaining patient signatures in the field in light of the COVID-19 crisis?

Date added: 3/24/20

Answer: The Medicare patient signature rules remain the same at present time. PWW has reached out to CMS officials asking them to relax the signature requirements during this crisis period. We are awaiting their response, and we will provide that to you as soon as we receive it. In the meantime, here is some guidance on dealing with patient signatures during the pandemic:

- Signature Rules Remain in Effect

The Medicare regulations have not been suspended or relaxed for obtaining a patient's signature for claim submission purposes. A patient must sign the assignment of benefits statement UNLESS the patient is "physically or mentally incapable of signing" or the patient is deceased prior to the submission of a claim for the service.

- A Patient with Confirmed or Suspected COVID-19 **May** Be Incapable of Signing

In light of possible or confirmed COVID-19 infections, if there are legitimate infection control procedures in place (e.g., infection control barriers) and the PCR documentation supports the reason for those procedures, then the patient may physically be incapable of signing under the Medicare signature rules. Likewise, a patient may be mentally incapable of signing under the Medicare signature rules if the patient was exposed to a COVID-19 patient or is suspected of having COVID-19. For example, some case reports suggest that patients with an active COVID-19 infection could be hypoxic, in respiratory distress and be disoriented with related mental status changes.

Patients with a high fever may also experience delirium or similar symptoms. Of course, the EMS practitioner must fully and accurately document the presence of such clinical findings. If a patient is under mental duress, or otherwise lacks mental capacity, such findings should be part of the clinical documentation to support the inability of the patient to sign. In all cases, the circumstances explaining this exposure and the mental or physical limitations to signing must be documented to meet the Medicare signature rule exceptions.

- "P.U.T.S. – COVID" by Itself is **Not** Sufficient Documentation

Simply putting "patient unable to sign due to "COVID" or "PUTS COVID" is not good enough. The

PCR documentation (and/or statements in the signature capture area) must contain documentation that clearly explains the physical or mental reason why the patient is incapable of signing. Just as “weakness” or “pain” or “fever” alone might not be sufficient to support medical necessity, “COVID” alone is not sufficient to indicate the reason the patient is unable to sign. It’s all about the documentation. Here are some examples of statements that may support a patient being physically or mentally incapable of signing. Please note that *these sample conditions below should only be documented when they are actually present* and they must be clearly explained in the supporting documentation:

- a. “Pt. is being transported with infection control barrier/procedures in place to be tested and/or further treated for COVID-19.”
- b. “Per infection control procedures and suspected COVID-19, direct patient contact with EMS equipment is to be limited.”
- c. “Pt. is transported in isolation unit and transferred with patient barrier protection and full infection control procedures in place.”
- d. “Pt. unable to sign due to barrier protections and other infectious disease/contact isolation precautions in place.”
- e. “Pt. is lethargic with altered mental status secondary to fever and/or COVID-19 infection and related symptoms.”
- f. “Pt. is having difficulty breathing and is very anxious and in emotional distress.”

- If the Patient is Incapable of Signing, Representatives May Sign

If the patient is physically or mentally incapable of signing, other representatives of the patient may sign on behalf of the patient. To meet this exception, the reason that the patient is incapable of signing must be clearly documented. The types of representatives that may sign are outlined in the signature regulation at 42 CFR [424.36\(b\)\(1\)-\(b\)\(5\)](#).

- If the Patient is Incapable of Signing, and No Representatives Are Available or Willing to Sign the (b)(6) Exception Can Still Apply

This section of the regulations, 42 CFR 424.36(b)(6), only applies if it is documented that the patient is incapable of signing and there are no representatives available or willing to sign on the patient’s behalf. This exception requires that an ambulance crew member who is present during the transport and at the time the *service is provided* signs a statement verifying that: 1) the patient was physically or mentally incapable of signing; and 2) that none of the representatives were available or willing to sign.

In addition, there must be additional documentation with the date and time the patient was transported and the name and location of the facility that received the patient. This requirement can be met by getting a hospital or facility representative to sign a separate statement noting these points, OR by having a receiving facility representative sign the PCR, obtaining a copy of the facility registration or face sheet, facility log, or other internal facility or hospital records that verify that the patient was transported to that destination.