TOPIC: SIGNATURES OF LICENSED HEALTH CARE PROVIDERS

The Commission has issued an advisory concerning the signatures of licensed health care providers on medical documentation in the context of medical fee dispute resolution. In Advisory 2002-03, the Commission sets out the following guidance.

First, a licensed health care provider seeking dispute resolution should sign any medical documentation submitted to the Medical Review Division. A stamped signature is acceptable if done with the authorization of the health care provider. Interdisciplinary providers such as psychologists or vocational counselors should sign the documentation for their services. A failure of a health care provider to sign documentation may result in adverse decision by MRD. The provider can cure its inadvertent failure to sign the medical documentation by submitting a sworn statement that the services were provided by the health care provider.

Second, MRD will review the files for signature defects if the carrier raises that issue. MRD will also review the file based upon any denial codes the carrier has raised prior to the filing of the request for dispute resolution. Carriers can raise the signature defect issue by filing at TWCC-62 (Explanation of Benefits) using the denial code, "N", "Not appropriately documented" with an additional explanation "no signature."

This advisory provides for an exception to Rule 133.307(j)(2). That provision limited the carrier's response to denial reasons presented to the provider prior the initial request for dispute resolution and indicated that additional denial reasons or defenses would not be considered in the review. Because the signature defect would not be apparent until the initial request is made, the Commission will allow that to be raised subsequently. Accordingly, carriers should review incoming initial requests for dispute resolution for signature defects. If those are presented, the carrier should raise the defense by filing a TWCC-62 with the "N, no signature" dispute code.