

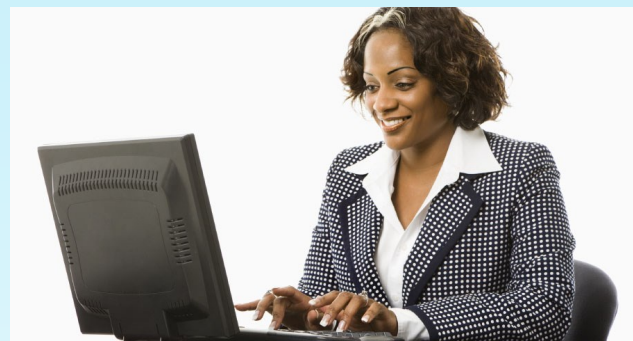
IHCP *bulletin*

INDIANA HEALTH COVERAGE PROGRAMS BT201526 APRIL 28, 2015

IHCP amends electronic signature policy for home health and hospice PA documentation

Effective June 1, 2015, the Indiana Health Coverage Programs (IHCP) will amend its electronic signature policy for physician orders and plans of treatment for home health and hospice fee-for-service prior authorization (PA) requests.

Electronic signatures will be acceptable on supporting documents submitted with PA requests for home health and hospice services received on or after June 1, 2015. An original, handwritten signature is still required on the *Indiana Health Coverage Programs Prior Authorization Request Form*, as well as on all state forms required as attachments to the request. The IHCP will continue to accept electronic signatures on supporting documentation for all other types of PA requests as well.



Electronic signatures are accepted as long as the provider's electronic health record system provides the appropriate protection and assurances that the rendering provider signed the document and the signature can be authenticated. If the appropriate controls are in place, electronic signatures are acceptable. Providers using electronic systems need to recognize the potential for misuse or abuse with alternate signature methods. Providers bear the responsibility for the authenticity of the documentation and signatures. Physicians are encouraged to check with their attorneys and malpractice insurers regarding electronic signatures. Any provider using an electronic signature is required to follow the requirements of *Indiana Code (IC) 26-2-8-116*.

IC 26-2-8-116

Electronic signature involving individual health information

Sec. 116.

(a) As used in this section, "authorization" means a consent, an approval, or an authorization between an individual and a person.

(b) As used in this section, "electronic identification" means the electronic identification system for form, location, and endorsement that is specified in subsection (d).

(c) Electronic signature authentication and identification may be used for an individual who participates in agreements, authorizations, contracts, records, or transactions that involve individually identifiable health information, including medical records and record keeping, transfer of medical records, medical billing, health care proxies, health care directives, consent to medical treatment, medical research, and organ and tissue donation or procurement.

(d) The electronic authentication and identification under subsection (c) may be accomplished by an interactive system of security procedures that include any of the following:

(1) A tamper proof electric appliance that receives input of unique identification numbers, unique biometric identifiers, or location devices.

(2) *A computerized authentication process for biometric identifiers that is linked to the appropriate identification numbers upon receipt of the identifiers.*

(3) *Transmission of verification of the identifiers to a securely maintained electronic repository.*

No provision in this section may be construed to supersede or preempt applicable federal and state law, including the Indiana Uniform Electronic Transactions Act (IC 26-2-8), the Health Insurance Portability and Accountability Act of 1996 and associated regulations, and 21 CFR Part 11.

As added by P.L. 77-2005, SEC. 1.

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