

Title 23: Division of Medicaid

Part 200: General Provider Information

Part 200 Chapter 1: General Administrative Rules for Providers

Rule 1.9: Authorized Provider Representative

The Division of Medicaid defines an authorized provider representative as an employee or agent of a provider designated by the provider to act for the provider with the provider's knowledge and written consent in order to manage and submit claims to the Division of Medicaid for payment.

- A. An authorized provider representative must not have been convicted of or pleaded guilty to or nolo contendere to a felony or certain misdemeanors including, but not limited to, fraud, forgery, counterfeiting, embezzlement, identity theft, tax evasion, money laundering, or any other crime related to dishonesty or concealment. Reversal on appeal or a pardon granted for the conviction or plea of these crimes does not mitigate this requirement.
- B. A provider designating an authorized provider representative or agent must use the Appointment of Authorized Provider Representative or Agent Form included in the Mississippi Medicaid Provider Billing Handbook. This form must be kept on file at the provider's main office and be available to the Division of Medicaid upon request.

Source: Miss. Code Ann. §§ 43-13-117, 43-13-121.

History: New rule eff. 04/01/2020.

Rule 1.10: Electronic Signatures

- A. The Division of Medicaid defines an electronic signature (e-signature) as an electronic symbol attached to or logically associated with a document or communication to be transmitted or submitted to the Division of Medicaid.
 - 1. The Division of Medicaid recognizes an electronic signature as an electronic symbol or process attached to, or logically associated with, a document or communication with the Division of Medicaid when executed or adopted by a person with the intent to electronically sign a document or communication when the application of the electronic signature:
 - a) Is made by the person whose electronic signature is being applied,
 - b) Identifies a person as the signer,
 - c) Authenticates a person as the signer,

- d) Includes the date and time of the application of the electronic signature, and
 - e) Indicates intent of approval of information contained in the electronically signed document or communication.
2. The Division of Medicaid considers electronic signatures the equivalent of full handwritten signatures or handwritten initials.
- a) An electronic signature will not be denied solely on the grounds that it is in electronic form.
 - b) A duplicative image of the original electronic signature or a signature stamp is not a valid electronic signature.
 - c) A provider cannot refuse to accept a handwritten signature from a beneficiary.
- B. Providers must ensure that electronic signatures applied to an electronic health record EHR and/or medical document cannot be excised, copied, or otherwise transferred to falsify an EHR or medical document.
- C. Providers are permitted to use e-signatures in submissions to the Division of Medicaid including, but not limited to, Provider Enrollment Applications and claim forms.
1. Provider e-signatures must be created using e-signature software including, but not limited to, the following:
- a) Right Signature™,
 - b) Adobe E-Sign, or
 - c) Electronic health record (EHR) software. [Refer to Miss. Admin. Code Part 200, Rule 5.7]
2. An authorized provider representative may use a provider's e-signature to make submissions for payment to the Division of Medicaid at the provider's direction. The authorized provider representative must print their name next to the provider's e-signature. [Refer to Miss. Admin. Code Part 200, Rule 1.9.]
3. Any e-signature appearing on an EHR must be made by the treating practitioner.
- a) EHR e-signature-making authority may not be delegated to any other party.
 - b) E-signatures appearing on an EHR must comply with Division of Medicaid requirements regarding EHR. [Refer to Miss. Admin. Code Part 200, Rule 5.7.]

D. Beneficiaries are permitted to use e-signatures in submissions, including Medicaid applications, to the Division of Medicaid.

1. Beneficiaries may create e-signatures through touchscreen technology, online verification systems, and other methods regularly used for beneficiary applications and receipt of benefits in accordance with applicable state and federal laws.
2. Beneficiaries may use e-signatures in records that normally appear in an EHR including, but not limited to, consent for treatment. [Refer to Miss. Admin. Code Part 200, Rule 5.7.]
3. A beneficiary's representative may use an e-signature for purposes of both application and receipt of benefits.
 - a) The representative must sign both the beneficiary's name and the representative's name when using an e-signature.
 - b) A representative's use of an e-signature must comply with Division of Medicaid requirements regarding applicant and beneficiary representatives. [Refer to Miss. Admin. Code Part 101, Rules 3.3 and 3.4.]

Source: 12 C.F.R. § 609.910, 42 C.F.R § 435.907, Miss. Code Ann. §§ 43-13-117, 43-13-121, 75-12-3, 75-12-9.

History: New Rule eff. 04/01/2020.

Rule 1.11: Provider Claim Submission Signatures

- A. The Division of Medicaid allows providers' signatures on claims to be applied using one (1) of four (4) different methods:
1. Electronic signature [Refer to Miss. Admin. Code Part 200, Rule 1.10],
 2. Typed signature,
 3. Signature stamp bearing the signature of the provider, or
 4. Handwritten only by the provider. The ability to make a handwritten signature may not be delegated to another party.
- B. A provider may delegate the ability to affix their electronic, typed, or stamped signature to an authorized provider representative when submitting claims on the provider's behalf. The provider must complete and keep on file the Appointment of Authorized Provider Representative or Agent Form included in the Mississippi Medicaid Provider Billing Handbook. [Refer to Miss. Admin. Code part 200, Rule 1.9.]

C. If there is no printed name accompanying an electronic, typed, or signature stamp, it is presumed that the provider affixed the signature to the claim.

Source: Miss. Code Ann. §§ 43-13-117, 43-17-121.

History: Revised eff. 04/01/2020.

Chapter 5: General

Rule 5.7: Electronic Health Records

A. The Division of Medicaid recognizes an electronic health record (EHR) as an electronic version of a beneficiary's medical history and key administrative clinical data relevant to a beneficiary under the care of a particular provider, that is maintained by a provider over time, and may include, but is not limited to:

1. Demographics,
2. Progress notes,
3. Problems,
4. Medications,
5. Vital signs,
6. Past medical history,
7. Immunizations,
8. Laboratory data, and
9. Imaging data.

B. A provider may use an electronic signature (e-signature) in an EHR. E-signatures in EHR must:

1. Meet certified electronic health record technology (CEHRT) criteria according to the National Institute of Standards and Technology (NIST) and the Office of the National Coordinator for Health Information Technology (ONC) standards,
2. Be in compliance with both Uniform Electronic Transactions Act (UETA) and Electronic Signatures in Global and National Commerce Act (ESIGN Act) standards, and
3. Maintain compliance with the Health Insurance Portability and Accountability Act (HIPAA) in regards to the access, transfer, storage and signing of EHRs.

4. Comply with Division of Medicaid requirements regarding e-signatures. [Refer to Miss. Admin. Code Part 200, Rule 1.10.]

C. A beneficiary may use an e-signature in an EHR. The beneficiary must:

1. Consent to the use of an electronic signature when completing necessary forms, including, but not limited to, the consent for treatment.
2. Be given the option to use an electronic or handwritten signature.
3. Be furnished an electronic or printed copies of all documents electronically signed.
4. Comply with Division of Medicaid requirements regarding e-signatures. [Refer to Miss. Admin. Code Part 200, Rule 1.10.]

Source: 42 C.F.R. § 435.907; Miss. Code Ann. §§ 43-13-117, 43-13-121, 75-12-1 et. seq.

History: Revised eff.04/01/2020; New eff. 07/01/2019.

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- A. An authorized provider representative must not have been convicted of or pleaded guilty to or nolo contendere to a felony or certain misdemeanors including, but not limited to, fraud, forgery, counterfeiting, embezzlement, identity theft, tax evasion, money laundering, or any other crime related to dishonesty or concealment. Reversal on appeal or a pardon granted for the conviction or plea of these crimes does not mitigate this requirement.
- B. A provider designating an authorized provider representative or agent must use the Appointment of Authorized Provider Representative or Agent Form included in the Mississippi Medicaid Provider Billing Handbook. This form must be kept on file at the provider's main office and be available to the Division of Medicaid upon request.

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 - a) Is made by the person whose electronic signature is being applied,
 - b) Identifies a person as the signer,
 - c) Authenticates a person as the signer,

- d) Includes the date and time of the application of the electronic signature, and
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2. The Division of Medicaid considers electronic signatures the equivalent of full handwritten signatures or handwritten initials.
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- a) EHR e-signature-making authority may not be delegated to any other party.
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3. A beneficiary's representative may use an e-signature for purposes of both application and receipt of benefits.
 - a) The representative must sign both the beneficiary's name and the representative's name when using an e-signature.
 - b) A representative's use of an e-signature must comply with Division of Medicaid requirements regarding applicant and beneficiary representatives. [Refer to Miss. Admin. Code Part 101, Rules 3.3 and 3.4.]

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B. A provider may delegate the ability to affix their electronic, typed, or stamped signature to an authorized provider representative when submitting claims on the provider's behalf. The provider must complete and keep on file the Appointment of Authorized Provider Representative or Agent Form included in the Mississippi Medicaid Provider Billing Handbook. [Refer to Miss. Admin. Code part 200, Rule 1.9.]

C. If there is no printed name accompanying an electronic, typed, or signature stamp, it is presumed that the provider affixed the signature to the claim.

Source: Miss. Code Ann. §§ 43-13-117, 43-17-121.

History: Revised eff. 04/01/2020.

Chapter 5: General

Rule 5.7: Electronic Health Records and Electronic Signature

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5. Vital signs,
6. Past medical history,
7. Immunizations,
8. Laboratory data, and
9. Imaging data.

B. A provider may use an electronic signature (e-signature) in an EHR. E-signatures in EHR and electronic signatures must:

1. Meet certified electronic health record technology (CEHRT) criteria according to the National Institute of Standards and Technology (NIST) and the Office of the National Coordinator for Health Information Technology (ONC) standards,
2. Be in compliance with both Uniform Electronic Transactions Act (UETA) and Electronic Signatures in Global and National Commerce Act (ESIGN Act) standards, and
3. Maintain compliance with the Health Insurance Portability and Accountability Act (HIPAA) in regards to the access, transfer, storage and signing of EHRs.

4. Comply with Division of Medicaid requirements regarding e-signatures. [Refer to Miss. Admin. Code Part 200, Rule 1.10.]

~~C. The Division of Medicaid recognizes an electronic signature as an electronic symbol or process attached to, or logically associated with, an EHR or medical document and executed or adopted by a person with the intent to electronically sign an EHR or medical document when the application of the electronic signature: [Moved to Miss. Admin. Code Part 200, New Rule 1.10]~~

- ~~1. Is made by the person whose electronic signature is being applied,~~
- ~~2. Identifies a person as the signer of an EHR,~~
- ~~3. Authenticates a person as the signer of an EHR, and~~
- ~~4. Indicates intent of approval of information contained in the electronically signed EHR or medical document.~~

~~D. The Division of Medicaid considers electronic signatures as the equivalent of full handwritten signatures or handwritten initials. [Moved to Miss. Admin. Code Part 200, New Rule 1.10]~~

- ~~1. An electronic signature will not be denied solely on the grounds that it is in electronic form.~~
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~~E. Providers must ensure that electronic signatures applied to an EHR and/or medical document cannot be excised, copied, or otherwise transferred to falsify an EHC or medical document. [Moved to Miss. Admin. Code Part 200, New Rule 1.10]~~

~~C.F. A beneficiary may use an e-signature in an EHR. The beneficiary must:~~

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- ~~2. Be given the option to use an electronic or handwritten signature.~~
- ~~3. Be furnished an electronic or printed copies of all documents electronically signed.~~
- ~~4. Comply with Division of Medicaid requirements regarding e-signatures. [Refer to Miss. Admin. Code Part 200, Rule 1.10.]~~

Source: ~~15 U.S.C. § 7001~~; 42 C.F.R. § 435.907; Miss. Code Ann. §§ 43-13-117, 43-13-121, 75-12-1; et. seq.

History: Revised eff.04/01/2020; New eff. 07/01/2019.