# Hospice Bulletin 31

Commonwealth of Massachusetts

Executive Office of Health and Human Services

Office of Medicaid

[www.mass.gov/masshealth](https://www.mass.gov/orgs/masshealth)

**DATE:** March 2024

**TO:** Hospice Agencies Participating in MassHealth

**FROM:** Mike Levine, Assistant Secretary for MassHealth [signature of Mike Levine]

RE: Electronic Signature Policy for Hospice Providers - Update

## Background

MassHealth is issuing this bulletin to update hospice providers on the use of electronic signatures on forms requiring signatures.

MassHealth will accept electronic signatures on all hospice forms (such as election statements and revocation statements). These forms include MassHealth-created hospice forms as well as provider-created hospice forms. Electronic signatures are permissible for individuals including but not limited to

* the member;
* the member’s authorized signatory;
* the hospice interdisciplinary team;
* the member’s physician; and
* other prescribing providers.

Electronic signatures must meet all requirements in this bulletin. In addition, electronic signatures must meet all other federal and state requirements.

Before signing a MassHealth form with an electronic signature, providers and authorized signatories must ensure that they are using the most recent version of the form. The most up-to-date versions of provider forms can be downloaded from [MassHealth Provider Forms](https://www.mass.gov/masshealth-provider-forms). The signature field of the form will indicate if electronic signatures are permitted.

## Acceptable Forms of Signatures

For hospice services, MassHealth will accept provider signatures executed by an authorized signatory in any of the following formats:

* Traditional “wet signature” (ink on paper);
* Electronic signatures affixed using an appropriate digital tool including, but not limited to
	+ Adobe Sign; or
	+ DocuSign; and
* Electronic signatures that are either
	+ hand drawn using a mouse or finger if working from a touch screen device; or
	+ an uploaded picture of the signatory’s hand-drawn signature.

When an electronic signature is used (e.g., the signature was not affixed using a digital tool), the signature must

* be visible;
* include the signatory’s name and title; and
* have a signature date.

When a hand drawn or uploaded electronic signature (not affixed using a digital tool) is used, one of the following notations (typically typed next to the electronic signature) must also be included to indicate that the signatory’s name was electronically signed:

* Electronically signed by
* Authenticated by
* Approved by
* Completed by
* Finalized by
* Signed by
* Validated by
* Sealed by

## Unacceptable Forms of Signatures

Typed text of a name not generated by a digital tool, even in computer-generated cursive script, or an electronic symbol are not acceptable forms of electronic signature. A signature stamp (a tool used to handstamp a prescriber’s or hospice provider’s name) does not constitute an electronic signature and is also not acceptable.

## Recordkeeping

Providers must maintain validated and authenticated electronically signed forms in the member’s records in accordance with MassHealth recordkeeping requirements.

## MassHealth Website

This bulletin is available on the [MassHealth Provider Bulletins](http://www.mass.gov/masshealth-provider-bulletins) web page.

[Sign up](https://www.mass.gov/forms/email-notifications-for-provider-bulletins-and-transmittal-letters) to receive email alerts when MassHealth issues new bulletins and transmittal letters.

## Questions

If you have questions about the information in this bulletin, please contact the MassHealth Customer Service Center at (800) 841-2900 or email your inquiry to provider@masshealthquestions.com.

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