

Teaching physicians are paid under the Medicare Fee Schedule when one of these criteria are met:

1. the service is personally furnished by the teaching physician
 2. the service is furnished by a resident and the teaching physician is physically present during the critical or key portions of the service and appropriately documents his/her presence
 3. the service is furnished by a resident utilizing the Medicare Primary Care Exception rules within an approved GME program. Additional “Medicare Primary Care Exception” information can be found in the ‘Billing Rules’ section of this manual.
- * The Teaching Physician Supervision standards do not apply to non-physician providers (i.e. NPs and PAs). This means that the APP **cannot** bill for services rendered by residents under APP supervision. However, the APP may use the residents, students or other medical team members documentation to support their own service.

Physical Presence Requirements

- ◆ The teaching physician must be located in the same room as the patient and performs a face-to-face service.
 - ◆ Documentation must include an “I, me, or my” statement.
 - ✎ Acceptable attestations:
 - *I saw the patient*
 - *Patient seen and examined by me*
 - *Per my exam*
 - *I was present during entire procedure*
 - NOT acceptable attestations:
 - *Patient seen*
 - *Seen & agree*
 - *Discussed with resident. Agree*
 - *Patient seen and examined with housestaff*
- * Dictations/notes documented solely by the teaching physician **MUST** include a statement of physical presence (i.e. “I, me or my” statement) if a resident was involved in the service.

Evaluation & Management (E&M) Services

- ◆ Identify resident/fellow whose note you are linking to
 - Naming the resident/fellow/APP is not required when there is a direct link between the providers by way of a unified paper form, dictation, or EMR entry.
- ◆ Signature
- ◆ Date of service (which is defined as when the teaching physician has a face to face)
- ✎ Recommended attestations:
 - *I have personally interviewed and examined the patient. I have reviewed the provider's history, physical exam, assessment and management plans. I concur with or have edited all elements of the provider's note.*
 - *Patient seen and examined by me. I have reviewed and agree with Dr. _____'s note.*
- ✎ If the date of service on the note is not the date the teaching physician had a face to face, then the recommended attestation is:
 - *I have personally interviewed and examined the patient on ***. I have reviewed the provider's history, physical exam, assessment and management plans. I concur with or have edited all elements of the provider's note.*

Resident Only Services

- ◆ When a service is provided solely by a resident/fellow (i.e. a teaching physician did not physically see the patient, nor perform the service), it is considered a "Resident Only" service
- ◆ A charge (CPT code and modifier) should be submitted to track these services and allow for possible billing to commercial payers.
 - Select the appropriate CPT code and diagnosis code that represents the service provided by the resident/fellow
 - Select the modifier "ZR". This modifier tells the billing staff that the service is a "resident only" service.
 - Billing staff will review patient's insurance and determine if the service is billable
- ◆ The teaching physician is responsible for documenting the level of supervision provided
 - ✎ Available SmartPhrases
 - .attengensuper (*I provided general supervision and was available during the care of this patient*)
 - .attemreview (*I have reviewed or discussed the resident's history, physical exam, assessment, and management plans. I concur with the assessment and plan as documented.*)

Surgical Procedure- Present For Entire Procedure

- ◆ The surgeon's physical presence must be documented in the medical record.
 - Documentation of the teaching surgeon's presence may be demonstrated by notes made by the teaching surgeon, resident/fellow, or operating room nurse.
- ✎ Recommended attestation:
 - *I was present for the entire procedure. I have edited this report as appropriate.*

Surgical Procedure – Present for Key/Critical Portions

- ◆ Physical presence statement documented by teaching surgeon
- ◆ Documentation of the key/critical portions of the surgical procedure by the teaching surgeon
 - Use patient-specific terms to describe the personal service provided or observed.

 Recommended attestation:

- *I was present for the key/critical portions of the procedure which were _____.*

Minor Procedure

- ◆ Physical presence statement documented by teaching physician
 - For procedures that take only 5 minutes or less to complete, e.g., simple suture, and involve relatively little decision making once the need for the operation is determined, the teaching physician must be present for the entire procedure in order to bill for minor procedures.

 Recommended attestation:

- *I was present for the entire procedure. I have edited the procedure note as appropriate.*

Endoscopy Procedure

- ◆ Physical presence statement documented by teaching physician
 - For endoscopic procedures the teaching physician must be present during the entire viewing (insertion of endoscope through removal of endoscope).

 Recommended attestation:

- *I was present for the entire endoscopy viewing.*

Diagnostic Test (Involving a Resident/Fellow)

- ◆ Statement of personal review of the image/data/tracing/specimen
- ◆ Statement of agreement, revision or amendment with the resident/fellow's interpretation

 Recommended attestation:

- *I have personally reviewed the data/image/tracing/specimen and I agree with the documented findings and interpretation.*

Diagnostic Test (Not Involving a Resident/Fellow)

- ◆ If the teaching physician's signature is the only signature on the interpretation, it is assumed that he/she personally performed the interpretation.
- ◆ If using a system without an audit trail, the attending needs to say that the interpretation is his/her interpretation.

Time Based Codes

- ◆ Documentation of time spent providing time-based service
 - Do not count time spent by the resident in the absence of the teaching physician.
 - See Outpatient and Inpatient sections for acceptable documentation and additional guidelines.

Combined (Combo) Attestations

- ◆ May be used when multiple services are documented in one note with a single attestation command .attcombo
- ◆ Multiple sentences may be selected, as appropriate

SmartPhrase .attcombo:

- *I have seen and examined the patient. I have reviewed the provider's history, exam, assessment and management plans*
- *I have personally interviewed and examined the patient on ***. I have reviewed the provider's history, physical exam, assessment and treatment plans. I concur with or have edited all elements of the provider's note.*
- *I have reviewed or discussed the resident's history, physical exam, assessment, and management plans. I concur with the assessment and plan as documented.*
- *I performed this service with the NP/PA. I personally made or approved the management plan for this patient. I {DID/DID NOT} perform the substantive portion of the medical decision making. I contributed to patient care in the following way ***.*
- *My total time on this date and for this encounter was *** minutes which included the following activities: {ATTTIME Activities:}. This time is independent and non-overlapping.*
- *I have personally reviewed the diagnostic test image/data/tracing/specimen and I agree with the documented findings and interpretation*
- *I was present for the key/critical portions of the procedure which were ****
- *I was present for the entire procedure*
- *I discussed this procedure with the resident/fellow and agree with the note as written.*
- *I was present for the entire endoscopy viewing.*
- *During the time I saw the patient on XX/XX/XX, {he/she} was critically ill due to ***. I spent *** minutes providing the following critical care services: ***. I have reviewed the provider's history, physical exam, assessment and management plans. I concur with or have edited all elements of the provider's note.*
- *I concur with or have edited all elements of the provider's note.*

Diagnostic Tests (Performed By PhD with PhD Fellow)

Recommended attestation:

- *I have met with this patient, personally reviewed the records, supervised test selection and administration, reviewed and interpreted the psychological test data (results) and fully edited this report.*

Psychotherapy/Counseling (PhD with PhD fellow)

Recommended attestation:

- *I have met this patient, read and edited this report as appropriate, and agree with the above assessment and plan as documented above.*