

	POLICY AND PROCEDURES		
	POLICY NUMBER:	CHLAMG-CI-1028	
	ORIGINAL DATE: 4/21/2022	REVISED: 1/23/2024	EFFECTIVE: 5/1/2022
DEPARTMENT: Compliance	APPROVED BY: Chief Compliance Officer <i>(Reviewed and approved by CHLAMG ECC on April 21, 2022)</i>		
POLICY TITLE: Physician Attestation Guidelines (E/M Services)			

PURPOSE:

To outline the requirements for Teaching Physician presence and documentation when billing for Evaluation and Management (E/M) services where residents and/or medical students are involved in the care of patients. These requirements comply with Medicare and Medi-Cal’s Teaching Physician regulatory guidance for E/M services when a resident and/or medical student is involved in the service.

POLICY:

Physician services are provided to patients by members of the CHLA Medical Group practice, by physicians enrolled in accredited internship, residency, or fellowship programs within the CHLA Health System, and by approved, credentialed non-physician providers. Only professional services provided by billing providers or resident physicians supervised by faculty physicians and documented in the medical record are billable to third party payers and/or patients.

This policy outlines attestation requirements that support billable Evaluation and Management (E/M) services.

DEFINITIONS:

- A. **Evaluation and Management (E/M)** means those services represented by Current Procedural Terminology (CPT) codes 99202-99499, including time-based E/M services.
- B. **Medical Student** means an individual who participates in an accredited educational program, e.g., approved medical school or clinical education program that is not a GME program. A medical student is never considered to be a resident.
- C. **Resident** means an individual who participates in an approved GME program. The term includes residents and fellows.
- D. **Macro** refers to a command in the EHR or dictation application that automatically generates pre-determined text by the user that is entered into the note via a secure or password protected system.

PROCEDURES:

- A. **Attestation Statements.** These statements contain the minimum requirements. Some services may require more than one attestation statement. An authorized macro may be used to meet attestation requirements when all conditions of the attestation are met. Teaching physician attestation must have the same date of service (DOS) as the resident’s and medical student’s note or must reference the actual DOS of the encounter, if completed on a different date, to be billable.
- B. **Time-based Services.** When billing a service based on time, the teaching physician can only bill for the time when services were personally performed. Such time must be clearly documented in the note or attestation.



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Services performed by or with an APP	
Service provided solely by an APP	<u>No attestation is required.</u> APPs may perform services within their scope of licensure and delegation authority. Co-signature may be required for CCS patients.
Physician provides a non-critical care APP shared service	<i>"I saw and examined the patient with [APP name]. [Enter patient-specific details of service provided such as problem addressed, pertinent exam and/or data, assessment and plan]."</i>
Physician provides a contemporaneous critical care service with an APP	<i>"I saw and examined the patient with [APP name]. We spent a total of [] minutes providing critical care. The patient was critically ill during the time I provided services due to [enter details of diagnoses you are evaluating and treating and services you provided to assess, manipulate and support vital system function]."</i>
Physician provides a non-contemporaneous critical care service with an APP	<i>"I saw and examined the patient with [APP name]. I spent a total of [] minutes providing critical care in addition to the critical care provided by the APP. The patient was critically ill during the time I provided services due to [enter details of critical care diagnoses you are evaluating and treating]. [The services you provided to assess, manipulate, and support vital system function]."</i>
Services performed with a Resident	
Teaching physician sees a non-critical patient contemporaneously with a resident	<i>"I was present with the resident during the history and exam. I discussed the case with the resident and agree with the findings and plan as documented in the resident's note."</i>
Teaching physician sees a non-critical patient non-contemporaneously with a Resident	<i>"I saw and evaluated the patient. I discussed the case with the resident and agree with resident's findings and plan as documented in the resident's note."</i>
Teaching physician makes changes to resident's note.	<i>"I saw and evaluated the patient. I reviewed the resident's note and agree, except that [addition of patient-specific information supporting teaching physician's MDM]."</i>
Teaching physician sees a critical care patient with a Resident.	One of the above attestations, <u>plus</u> : <i>"I spent [] minutes providing critical care exclusive of teaching time and time spent performing separately billable services. The patient was critically ill during the time I provided services due to [enter details of critical care diagnoses you are evaluating and treating]. [The services you provided to assess, manipulate, and support vital system function]."</i>



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Services involving a Medical Student	
Service with presence of both resident and Teaching Physician	<p><u>Resident Attestation:</u> <i>“I have verified the medical student documentation and/or findings, including the history, physical exam and medical decision making. Additionally, I have personally performed or re-performed the physical exam or medical decision-making activities of this patient’s evaluation and management service.”</i></p> <p><u>Teaching Physician Attestation:</u> <i>“I personally examined the patient and agree with the resident’s note as written, including any changes or additions that the resident may have made to the medical student’s note. I actively participated in the medical decision-making process. Please see resident’s note for additional details.”</i></p>
Teaching physician service only with medical student	<p><i>“I was present and verified the medical student documentation and/or findings, including history, physical exam, and medical decision-making. Additionally, I have personally performed or re-performed the physical exam and medical decision-making activities of this patient’s evaluation and management service.”</i></p>

- C. **Audits.** Audits of E/M services will review for compliance with this policy. Services that do not comply with this policy may be unbillable and overpayments will be refunded to the appropriate payer.

REFERENCES:

Pub. No. 100-04, Centers for Medicare & Medicaid Services, Claims Processing Manual, Ch. 12 § 100.1 et seq.
 Medi-Cal Manual, Part 2, Evaluation and Management (E&M), *Teaching Physician Requirements for Evaluation and Management Services*
 California BPC § 2064

POLICY OWNER: CHLAMG Chief Compliance Officer