

**Policies and Procedures: WVU Physicians of Charleston**  
**Teaching Physician Documentation**

**Section:** Compliance  
**Chapter:** Billing  
**Policy:** Teaching Physicians Documentation

**I. Purpose**

The purpose of this policy is to set forth Medicare guidelines applicable to billing for services rendered by Supervising Physicians in Teaching Settings as set forth by the Centers for Medicare/Medicaid Services ("CMS").

**II. Scope**

This policy is applicable to services rendered in all patient care settings staffed by the faculty of WVU Physicians of Charleston where resident teaching is involved.

**III. Statement of Policy/Procedure**

- A. WVUPC faculty and billing personnel shall follow the guidelines set forth by CMS for teaching physician supervision and documentation, and the requirements for evaluation and management (E/M) services billed by teaching physicians. The applicable billing guidelines, set forth in CMS-Pub. 14-3, are attached to and made a part of this policy by reference. See attached guidelines (CMS Pub. 14-3, Transmittal 1780, November 22, 2002), and related Medicare Carrier Manual provisions.
- B. The teaching documentation guidelines shall apply to any patient encounter where payment for services will be provided by any state or federal payor. Those payors are included in but not limited to the list below.

Champus/Tricare  
Federal Bureau of Prisons  
Indian Health Services  
Medicaid Programs, including HMO Medicaid Plans  
Medicare  
Private Pay  
Railroad Medicare  
United Mine Workers  
Veteran's Administration  
West Virginia PEIA  
Workman's Compensation

- C. The teaching physician must document his/her participation in the patient's care in a timely fashion and in a manner consistent with departmental and organizational guidelines.
- D. The teaching physician must document **at least** the following:
1. The teaching physician has performed the service or was physically present during the key or critical portions of the service when performed by the resident; and
  2. The participation of the teaching physician in the management of the patient.
- E. Other than the review of systems and/or past family/social history, teaching physicians are not permitted to use student documentation for billing purposes.
- F. Teaching physicians providing E/M services in those primary care centers which are eligible for the primary care exception, which is set forth in subsection C.3 of CMS Transmittal 1780, may bill Medicare for lower and mid-level E/M services providing by residents, but only to the extent permissible under the primary care exception requirements.
- G. The requirements applicable to the primary care exception are set forth in their entirety in subsection C.3 of CMS Transmittal 1780, attached hereto in its entirety and incorporated herein by reference. Teaching physicians submitting claims under the primary care exception may not supervise more than four residents at any given time and must direct the care from such proximity as to constitute immediate availability. The teaching physician must:
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1. Not have other responsibilities (including supervision of other personnel) at the time the service was provided by the resident.
  2. Have the primary medical responsibility for patients cared for by the residents.
  3. Ensure that the care provided was reasonable and necessary.
  4. Review the care provided by the resident during or immediately after each visit. This must include a review of the patient's medical history, the resident's findings on physical examination, the patient's diagnosis, and treatment plan.
  5. Document the extent of his/her own participation in the review and direction of the services furnished to each patient.
- H. For all encounters where the teaching physician and the resident both see the patient and participate in the patient's care, the modifier GC will be added to all CPT codes.

- I. For all encounters where the primary care exception applies and the teaching physician does not see the patient, a modifier GE will be added to the CPT code. The following is a list of CPT codes which qualify for the GE modifier:

99201  
99202  
99203  
99211  
99212  
99213  
HCPCS G0402 ("Welcome to M'Care Exam")  
HCPCS G0438/G0439 (Annual Wellness visits)

#### **IV. Implementation**

Each practice administrator shall assure that the provisions of this policy are communicated to and followed by the staff of their respective departments.

#### **V. Administration and Interpretations**

Questions regarding this policy must be addressed with your primary clinical departmental biller, practice administrator, the WVUPC Billing & Revenue Cycle Committee, or the WVUPC Compliance Office.

#### **VI. Amendment or Termination of this Policy**

This policy may be amended or terminated at any time.

#### **VII. References**

CMS-Pub. 14-3 (Medicare Carriers Manual, Part Three, Claims Process, Section 15016), "Supervising Physicians in Teaching Settings." 42 C.F.R. 415.174(a)(3).

Medicare Claims Processing Manual, Chapter 12, Section 100, Teaching Physician Services.