Section III - Basis Of Payment For Services Provided
Supervising/Teaching Physicians
Primary Care Exception – p. 26
• That they performed the service or were physically present during the key or critical portions of the service when they were performed by the resident; and

• Their participation in the management of the patient.

**Note:** The documentation should also reference the resident's notes.

Regardless of whether physician costs are included in or excluded from a facility’s rate structure, a facility may bill Medicaid for a clinic visit performed by a resident only when there is appropriate supervision and documentation in the record.

Adequate documentation, along with the supervising/teaching physician’s countersignature, indicates involvement of the teaching/supervising physician and makes the provided service billable to Medicaid. These documentation requirements pertain to both salaried physicians and physicians who bill Medicaid fee-for-service.

**Primary Care Exception**

With respect to evaluation/management visits in primary care settings where encounters entail medical decision making of low or moderate complexity, teaching physicians may bill for services rendered to a patient, even though the services were furnished without their presence, provided the Medicare Primary Care Exception conditions are met.

These conditions include the requirement that teaching physicians:

1. Supervise no more than four residents at a time;

2. Be immediately available and have no other responsibilities at the time the patient is being seen by the resident;

3. Assume management responsibility for the patients and ensure that the services rendered are appropriate;

4. Review with the resident, during or immediately following each visit, the key elements of the services provided;

5. Document the extent of their participation in the review and direction of services.

**Surgical, High Risk, or Other Complex Procedures**

Teaching physicians are responsible for preoperative, operative, and post-operative care. They should be present during all critical and key portions of these types of procedures, and should be immediately available to return to the procedure throughout the entire process.

To bill for surgical, high-risk, or other complex procedures, the teaching physician must be present during all critical and key portions of the procedure and be immediately