**REQUIRED MEDICAL RECORD DOCUMENTATION FOR SUPERVISING/TEACHING PHYSICIANS**

DOH Medicaid Update November 2003 Vol.18, No.11

Medicare has recently clarified Medicare documentation requirements for billing Evaluation/Management (E/M) services by supervising/teaching physicians. **Medicaid documentation policy for supervising/teaching physicians is being changed to mirror what is now in place for Medicare patients.**

**Supervising/teaching physicians who are not being directly reimbursed by a facility for patient care services may bill Medicaid while supervising a resident, provided that personal and identifiable services are provided by the teaching physician to the patient in connection with the supervisory services.**

Teaching physicians **have been previously instructed** that:

- The supervising/teaching physician must provide appropriate documentation in the patient medical record, including the extent of their participation in the history, examination, and complexity of the medical decision-making used to determine the level of service, as required by the *Physicians' Current Procedural Terminology*.
- If the documentation would be repeating information already obtained and documented by the resident, the teaching physician need only summarize comments that relate to the resident's entry.

Under the new documentation policy, teaching supervisors need not repeat documentation already provided by a resident:

- **When services are provided to a Medicaid recipient by a resident physician in a hospital outpatient department or freestanding clinic setting, notes entered in the medical record by the resident need not be repeated by the supervising/teaching physician.** However, the supervising/teaching physician must personally document at least the following:
  - 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 as described in the examples that follow.**
<table>
<thead>
<tr>
<th>E/M Service</th>
<th>Minimally Acceptable Documentation by Teaching/Supervising Physician</th>
<th>Unacceptable Documentation by Teaching/Supervising Physician</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hospital Admission</td>
<td>&quot;I performed a history and physical examination of the patient and discussed his management with the resident. I reviewed the resident's notes and agree with the documented findings and plan of care&quot; (accompanied by countersignature).</td>
<td>&quot;Agree with above&quot; (accompanied by countersignature).</td>
</tr>
<tr>
<td></td>
<td>&quot;Agree with above&quot; (accompanied by countersignature).</td>
<td>&quot;Seen and agree&quot; (accompanied by countersignature).</td>
</tr>
<tr>
<td></td>
<td>&quot;Rounded, Reviewed, Agree&quot; (accompanied by countersignature).</td>
<td>&quot;Rounded, Reviewed, Agree&quot; (accompanied by countersignature).</td>
</tr>
<tr>
<td>Follow-Up Visits</td>
<td>&quot;Hospital Day #3 - I saw the patient and evaluated his progress. I agree with the findings and plan of care documented in the resident's notes&quot; (accompanied by countersignature).</td>
<td></td>
</tr>
<tr>
<td></td>
<td>- or - &quot;See resident's notes for details. I saw and evaluated the patient and agree with the resident's findings and plans as written&quot; (accompanied by countersignature).</td>
<td></td>
</tr>
<tr>
<td></td>
<td>- or - &quot;I saw the patient with the resident and agree with the resident's findings and care plan&quot; (accompanied by countersignature).</td>
<td></td>
</tr>
</tbody>
</table>

Physicians are reminded that, 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 available to furnish services during the entire procedure.

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.

As noted above, this represents a change from prior Medicaid requirements in an effort to correspond with Medicare's more liberal revised policy ([Transmittal 1780](http://www.health.state.ny.us/health_care/medicaid/program/update/2003/nov2003) dated November 22, 2002). Medicaid's prior policy is contained in the November 1999 Medicaid Update and may be accessed at the Department of Health's web site:

http://www.health.state.ny.us/health_care/medicaid/program/1999/1199med.htm#teaching

For questions regarding required medical record documentation by supervising/teaching physicians, please call the Office of Medicaid Management at (518) 473-2160.

http://www.health.state.ny.us/health_care/medicaid/program/update/2003/nov2003