I. Title

Clinical Billing, Documentation, and Coding

II. Audience

Physicians, Non-Physician Providers, Department Administrators, Billing Managers, Billing and Coding Staff

III. Policy

At the University of Texas Medical Branch (UTMB Health), physician services are provided to patients by faculty members of UTMB Faculty Group Practice, by physicians enrolled in accredited internship, residency, or fellowship programs within the UTMB system, and by approved, credentialed non-physician providers. It is an Institutional policy that only professional services provided by billable providers or resident physicians adequately supervised by faculty physicians and documented in the medical record are billable to third party payers and/or patients.

Claims and submissions for reimbursement of hospital, professional, or any clinical services must meet all applicable requirements as specified by the payer. UTMB is committed to full compliance with the laws and regulations that apply to our Institution, including all federal and state health care programs requirements (such as Medicare and Medicaid). UTMB shall prepare and submit accurate claims consistent with such requirements.

IV. Procedures

The guidelines for billing professional services provided in a teaching setting include, but are not limited to:

A. Inpatient

1. Evaluation and Management Services (E/M)

For all payers, UTMB requires that the teaching physician be present, and document his/her presence and participation during the key portions of the service when performed by the resident. The participation of the teaching physician in the management of the patient must also be documented. With an appropriate teaching physician attestation, the documentation of the teaching physician and the resident can be combined to support the level of service billed. Additionally, the medical record documentation must support all services billed.

2. Major Procedures (Including Endoscopic Operations)

For all payers, UTMB requires that the teaching physician must be present during all critical and key portions of surgical, complex, or high-risk procedures, and be immediately available to furnish services during the entire procedure. If circumstances
prevent a teaching physician from being immediately available, then he/she must arrange for another qualified surgeon to be immediately available to assist with the procedure, if needed. When the teaching surgeon is present for the entire surgery, his or her presence may be demonstrated by notes in the medical record made by the physician, resident, or operating room nurse. There is no required information that the teaching surgeon must enter into the medical records. However, the documentation must be authenticated by the teaching physician with his/her signature. In addition, the medical record documentation must support all services billed.

3. **Minor and Bedside Procedures**
For Medicare patients, the teaching physician must be present for the entire procedure in order to bill for the service(s). The teaching physician must document his/her presence throughout the procedure on the teaching physician attestation. For Medicaid and other third party payers, the teaching physician must demonstrate within the documentation that medically appropriate supervision was provided. By co-signing the resident’s note, faculty physicians are attesting that they have provided the requisite supervision for the service(s) provided. Additionally, the medical record documentation must support all services billed.

4. **Endoscopy Procedures (Excludes endoscopic surgery that follows the major procedures policy above)**
For Medicare patients, the teaching physician must be present during the entire viewing. The entire viewing starts at the time the insertion of the endoscope and ends at the time of removal of the endoscope. Viewing of the entire procedure through a monitor in another room does not meet the teaching physician presence requirements. For Medicaid and other third party payers, the teaching physician must demonstrate within the documentation that medically appropriate supervision was provided. By co-signing the resident’s note, faculty physicians are attesting that they have provided the requisite supervision for the service(s) provided. Additionally, the medical record documentation must support all services billed.

B. **Outpatient**

1. **Evaluation and Management Services (E/M)**
For Medicare patients, the teaching physician must be present, and document his/her presence and participation during the key portions of the service when performed by the resident. The participation of the teaching physician in the management of the patient must also be documented. With an appropriate teaching physician attestation, the documentation of the teaching physician and resident can be combined to support the level of service billed. For Medicaid and other third party payers, the teaching physician must demonstrate within the documentation that medically direct supervision was provided (direct supervision means that the teaching physician must be in the building of the office or facility when and where the service is provided). By co-signing the resident’s note, faculty physicians are attesting that they have provided the requisite supervision for the service(s) provided. Additionally, the medical record documentation must support all services billed.

2. **Major Procedures**
For all payers, UTMB requires that the teaching physician must be present during the
critical and key portions of surgical, complex, or high-risk procedures and be immediately available to furnish services during the entire procedure. If circumstances prevent a teaching physician from being immediately available, then he/she must arrange for another qualified surgeon to be immediately available to assist with the procedure, if needed. When the teaching surgeon is present for the entire surgery, his or her presence may be demonstrated by notes in the medical record made by the physician, resident, or operating room nurse. There is no required information that the teaching surgeon must enter into the medical records. However, the documentation must be authenticated by the teaching physician with his/her signature. Additionally, the medical record documentation must support all services billed.

3. Minor Procedures
For Medicare patients, the teaching physician must be present for the entire procedure. The teaching physician must document his/her presence throughout the procedure on the teaching physician attestation. For Medicaid and other third party payers, the teaching physician must demonstrate within the documentation that medically appropriate supervision was provided. By co-signing the resident’s note, faculty physicians are attesting that they have provided the requisite supervision for the service(s) provided. Additionally, the medical record documentation must support all services billed.

4. Endoscopy Procedures (Excludes endoscopic surgery that follows the major procedures policy above)
For Medicare patients, the teaching physician must be present during the entire viewing. The entire viewing starts at the time the insertion of the endoscope and ends at the time of removal of the endoscope. Viewing of the entire procedure through a monitor in another room does not meet the teaching physician presence requirements. For Medicaid and other third party payers, the teaching physician must demonstrate within the documentation that medically appropriate supervision was provided. By co-signing the resident’s note, faculty physicians are attesting that they have provided the requisite supervision for the service(s) provided. Additionally, the medical record documentation must support all services billed.

V. References
Medicare Claims Processing Manual, Chapter 12, Section 100 – Teaching Physician Services.
Billing and Documentation Policy approved by MSRDP Board of Directors, 3/27/1997

VI. Dates Approved or Amended

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VII. Contact Information
Office of Institutional Compliance
(409) 747-8700