UNM Medical Group, Inc. University of New Mexico Physicians	Documentation Guidance	No.	9003
	Teaching Physician Attestation for Surgical Procedures, Procedures, Fracture Care	Effective Date	**FINAL**
		Revision Letter	**C**
		Applies To:	**UNMMG**

1.0 Purpose

The Centers for Medicare and Medicaid Services (CMS) has detailed specific documentation requirements for Teaching Physician (TP) Attestations for surgical procedures, procedures, and fracture care management when supervising residents. Non-compliance with CMS TP documentation requirements affects the ability for UNM Medical Group (UNMMG) to bill Medicare and Medicaid. This document provides guidelines for approved TP attestation language for surgical procedures, procedures, and fracture care management.

2.0 Scope

This guidance applies to UNM Health System physicians who teach/supervise residents.

3.0 Documentation

3.1 It is critical that documentation supports the TP presence for either the entire or key and critical portions of the surgical procedure, procedure, or fracture care management. Guidelines for approved language to document TP attestations are listed below:

Minor Procedures: **(5 minutes or less)** ***5 minutes or less refers to the typical time a physician with the required skill set would take to complete procedure, (not the resident's actual time).** ****Clarify attestation as surgery, procedure, or fracture care.** *****This is a requirement for both inpatient and outpatient procedures.**	**Teaching physician must be physically present for the <u>entire procedure</u>.** • Example of when TP is present for entire surgery/procedure/fracture care: "I was present for the entire surgery/procedure/fracture care management." ****(Be specific)** ❖ **Please note: Presence can be documented either by the resident or the TP for minor procedures.** ❖ Documentation of time is not a requirement.

Procedures performed in Treatment Room or on Unit/Floor by Resident <u>Alone</u> (i.e., chest tubes, arterial lines, etc.).	**Examples of documentation where Resident sees patient and Teaching Physician <u>*DOES NOT*</u> see patient. These encounters are non-billable.** • Resident sees patient <u>alone</u>. Case discussed with Resident. "I reviewed the progress note and agree with the resident's findings and plans as written. Case discussed with resident." • Resident sees patient and <u>performs procedure alone</u> (i.e., chest tubes, arterial lines, etc.). Case discussed with Resident. "I discussed the case with the resident and we determined the performed procedure was medically necessary. I reviewed the progress note and procedure details and agree with the resident's findings and plans as written. Case discussed with resident."
Single Surgery/ Major Procedure/Fracture care management (Greater than 5 minutes) ***Clarify attestation as surgery, procedure, or fracture care.**	**Teaching physician presence is required for the <u>critical or key portions</u> of the procedure/fracture care management.** • Example of when TP is present for critical and key portions of surgery/procedure/fracture care management: "I was present for the critical and key portions of the surgery/procedure/fracture care management and I was immediately available to provide assistance." ***(Be specific)** ❖ **Please note: Presence can be documented by the resident or the TP for a single major surgery/procedure/fracture care management.** ❖ Documentation of time is not a requirement.

Endoscopy procedures	**The teaching physician must be physically present from the <u>insertion of the endoscope through the removal of the endoscope.</u> (Viewing through a monitor in another room does not constitute physical presence)** • Example: "I was present for the entire procedure from insertion of the scope until removal of scope." *** Please note: Presence can be documented either by the resident or the TP for endoscopy procedures**
Overlapping Surgeries	**The teaching surgeon must be physically present during the critical or key portions of both operations. Consequently, the critical or key portions may not take place at the same time.** • When all of the key portions of the initial procedure have been completed, the teaching surgeon may become involved in a second procedure. • The teaching surgeon must personally document in the medical record that he/she was physically present during the critical or key portion(s) of both procedures • When a teaching physician is not present during non-critical or non-key portions of the procedure and is participating in another surgical procedure, he or she must arrange for another qualified surgeon to immediately assist the resident in the other case should the need arise. ❖ Example when the TP is present for the critical/key portion of two overlapping surgeries: "I was present during the key and critical portions of the surgery and I or another attending surgeon was immediately available throughout." ***Please note: Presence for each surgery must be documented by the teaching physician.**

4.0 Definitions

4.1 Addendum: Used to provide additional information in conjunction with a previous entry.

4.2 Attestation: Attestation means to affirm the correctness or truth of.

4.3 Critical or Key Portion: Part or parts of a service that the TP determines are the Critical or Key Portion of the surgical procedure.

4.4 Physically Present: When the TP is located in the same room as the patient (or a room that is subdivided with partitioned or curtained areas to accommodate multiple patients) and/or performs a face-to-face service.

4.5 Teaching Physician (TP): A TP is a physician who teaches and who supervises surgical procedures performed by residents as part of their training program.

4.6 Minor Procedure: Procedures that take only a few minutes (5 minutes or less) to complete, e.g., simple suture, and involve relatively little medical decision making once the need for the procedure is determined.

4.7 Related Documents and Hyperlinks:

Medicare Carriers Manual Part 3: Claims Process, Transmittal 1780; Section 15016 Supervising Physicians in Teaching Settings

http://www.cms.gov/Regulations-and-Guidance/Guidance/Transmittals/downloads/R811CP.pdf

5.0 Revision History

Effective Date	Revision Letter	Document Author	Description of Change
FINAL	A	Cassandra Romero	Initial Release.
FINAL	B	Jan Perea	Updated Information
FINAL	C	Sandy Colson	Inserted additional information