



AT THE FOREFRONT

UChicago
Medicine

Teaching Physician and Resident Billing Changes – 2022 Update

Prepared by Office of Corporate Compliance

Outreach & Education Services

November 2021 *updated 12-21-21*

Teaching Physician Billing Changes (Outpatient 99202-99215)

Scope of this Training

2022 updates for Teaching Physician billing in Outpatient clinics (99202-99215). “Resident” means an intern, resident or fellow. A student is never considered to be an intern or resident.

To properly apply 2022 changes, it is important to understand the difference between a Primary Care Exception and non-Primary Care Exception area:

- **Primary Care Exception area (GE modifier):** In qualified primary care centers, residents of at least 6 months may see patients without the physical presence of a Teaching Physician:
 - the TP supervises up to 4 Residents
 - must be immediately available with no other responsibilities at the time, and
 - must review the care provided by the resident *during or immediately after each visit*
 - must include a review of the history, physical exam findings, diagnosis & treatment plan
- **Non Primary Care Exception (GC modifier):** The Teaching Physician must be present during critical or key portions of the resident service, and the TP must participate in patient management. If the TP is not present during the critical and key portions, the TP must personally then perform the service in order to bill.

Recap of Teaching Physician Billing Requirements

A. Scenarios which are reimbursable in Teaching Physician settings

1. **Physician Alone:** services are personally furnished by a physician who is not a resident
2. **Physician with Resident:** Services furnished by a resident when TP is physically present during critical or key portions
3. **Primary Care Exception:** Services are furnished by a resident under a Primary Care Exception

B. Teaching Physician Documentation Requirements

When seeking payment for services involving residents, the medical record must demonstrate:

1. That the Teaching Physician **performed the service or was physically present during the key or critical portions** of the service when performed by the resident [PCE = reviewed the residents care]

AND

2. That the Teaching Physician participated in the management of the patient.

(The presence of the teaching physician during E/M services may also be demonstrated by the notes in the medical records made by physicians, residents, or nurses.)

Primary Care Exception Leveling (GE, Resident Alone) (Outpt)

PCE Leveling
99202-99215

2022

2021

2022

MDM
or Time

MDM
only

CHANGE from current practice

No Leveling by Time in 2022

► Includes Video Visits which use the same CPT's 99202-99215

Must Level PCE Services by Medical Decision Making



ELEMENTS	COMPLEXITY LEVEL				
	N/A	Minimal	Low	Moderate	High
1. Number and Complexity of Problems Addressed	N/A	Minimal	Low	Moderate	High
2. Amount and/or Complexity of Data to be Reviewed and Analyzed	N/A	Minimal or None	Limited	Moderate	Extensive
3. Risk of Complications and/or Morbidity or Mortality of Patient Management	N/A	Minimal Risk	Low Risk	Moderate Risk	High Risk
LEVEL of MDM	N/A	Straightforward	Low	Moderate	High
	99211	99202 (New) 99212 (Est)	99203 (New) 99213 (Est)	99204 (New) 99214 (Est)	99205 (New) 99215 (Est)

Note: PCE areas may continue billing up to Level 5 while the COVID-19 PHE is ongoing (99202-99215), after the PHE the limitation will go back to Level 3 (if physician does not also see patient)



Primary Care Exception Attestation

Primary Care Area Attestation (Modifier GE)

.ATTESTPRIMARYCAREEXCEPTION

Teaching Physician In Primary Care Exception	.ATTESTPRIMARYCAREEXC EPTION	I discussed this service with the resident which included a review of the patient's medical history, findings on physical exam, diagnosis and treatment plan. I agree with the assessment and plan. The trainee and I spent a total of *** minutes combined (excluding separately reportable procedure time) in care of this patient on @ED@.
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- *Time statement will not apply in 2022 and will be removed*
- *Level only by MDM*

Non-Primary Care Exception Leveling (GC) (Outpt)

Non PCE Leveling
99202-99215

2022

CMS clarification when leveling by time

Count only Teaching Physician Time, which includes:

1. F2F & Non F2F time spent on **qualifying activities** on the DOS &
2. Time the TP is present when the resident is performing **qualifying activities** on the DOS



Qualifying activities:

1. Preparing to see the patient (eg, review of tests)
2. Obtaining/reviewing separately obtained history
3. Performing a medically appropriate examination and/or evaluation
4. Counseling/education of the patient/family
5. Ordering medications, tests, or procedures
6. Referring and communicating with other health care professionals (when not separately reported)
7. Documenting clinical information in the electronic or other health record
8. Independently interpreting results (not separately reported) and communicating results to the patient/family/caregiver
9. Care coordination (not separately reported)

Do not count support staff time, housestaff time, time spent on travel, or time spent on teaching general concepts

2021

2022

MDM
or Time

MDM
or Time

NO CHANGE
from current practice



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Non-Primary Care Exception Attestations

Non Primary Care Exception Area (Modifier GC)

.ATTESTPRESENTAMB
(TP sees patient with Resident)

.ATTESTNOTPRESENTAMB
(TP not present with Resident, re-performs service)

Teaching Physician with Housestaff	.ATTESTPRESENTAMB	I was present with the resident and participated during the history and physical exam of the patient with {PATIENT COMPLEXITY: 91025} level of risk. I agree with the housestaff's assessment and plan of care. I spent a total of *** minutes (excluding separately reportable procedure time) in care of this patient on @ED@.
Teaching Physician Alone	.ATTESTNOTPRESENTAMB	I personally saw and physically examined the patient with {PATIENT COMPLEXITY: 91025} level of risk. I agree with the housestaff's assessment and plan of care. I spent a total of *** minutes (excluding separately reportable procedure time) in care of this patient on @ED@.

- *Time statements will remain in 2022. Only fill out time statement when leveling by time, statement will disappear when not used.*

Combined Documentation

Both the Teaching Physician and Resident may document physician services in the patient's record

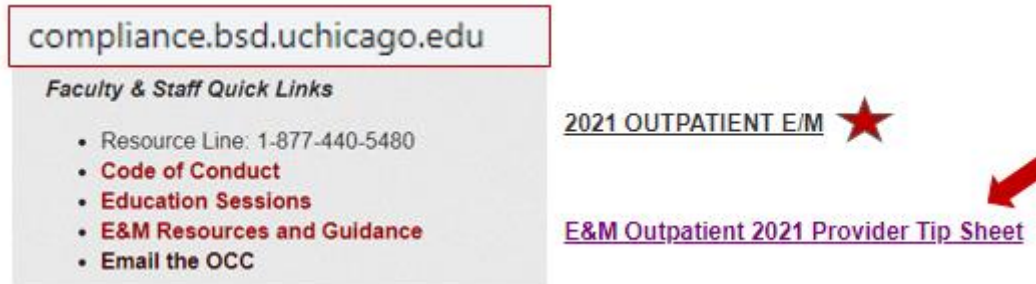
The combined Entries of the TP & Resident support the service billed:

- The medical record must sufficiently describe the **specific services furnished to the particular patient on that DOS**
- The **combined entries** in the medical record by the TP and Resident constitute the documentation for the service and together must support the medical necessity of the service
- Documentation should include the TP's attestation of the resident's documentation with any relevant notes added

Wrap-Up

Leveling Outpatient E/M's in 2022 (99202-99215):

- Only use MDM to level services in Primary Care Exception areas beginning Jan 1, 2022
- MDM or Time may continue to be used in Non Primary Care Exception areas in 2022
- For assistance leveling services by either MDM or Time, EPIC has an **Outpatient Calculator** tool which may be used
- The Compliance website has a detailed Tipsheet covering Outpatient E/M leveling



The screenshot shows a web page with the URL compliance.bsd.uchicago.edu at the top. Below the URL is a section titled "Faculty & Staff Quick Links" containing a list of links: "Resource Line: 1-877-440-5480", "Code of Conduct", "Education Sessions", "E&M Resources and Guidance", and "Email the OCC". To the right of this list, there are two links: "2021 OUTPATIENT E/M" with a red star icon, and "E&M Outpatient 2021 Provider Tip Sheet" with a red arrow pointing to it.

If you should have further questions following this training, please email compliance@bsd.uchicago.edu

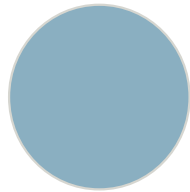


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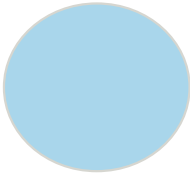
Contacts/Resources

Reporting Mechanisms

With our non-retaliation policy, you may feel comfortable reporting any suspected or actual violations that you may be aware of or concerned about



Contact the Office of Corporate Compliance directly at (773) 834-4588 or PHA: 773-834-2995 or you may email us at: compliance@bsd.uchicago.edu or PHA: lwarren@bsd.uchicago.edu



Report directly to your immediate supervisor, departmental manager, the Department of Human Resources, or Legal Affairs at (773) 702-1057/ 24 Hour Pager #: 7602



Call the Compliance Resource Line at (877) 440-5480, or internally at (773) 834-3222

Compliance Resource Line

(877) 440-5480 or PHA: (833) 484-0055

PURPOSE

The Compliance Resource Line may be used to obtain answers to questions relating to compliance and to report suspected or potential misconduct, violations of the Medical Center's compliance policies, or violations of the law.



Toll Free # with voicemail and no caller id

All calls investigated

Callers are covered by non-retribution, non-retaliation policies

Callers who wish to remain anonymous are informed that in some circumstances, their concerns cannot be adequately addressed unless certain information is revealed that may also reveal the caller's identity.

Resources

- ❖ **OCC Website:** <http://compliance.bsd.uchicago.edu/>
- ❖ **Compliance Resource Line**(877) 440-5480, or at (773) 834-3222
PHA: (833) 484-0055, or at (708) 915-5678
- ❖ **Krista Curell 2-9785**.....Executive Vice President
- ❖ **Tracy Volel 4-4733**Chief Compliance Officer
- ❖ **Leslie Warren 4-2995**Associate Compliance Officer
- ❖ **Tomicia James-Miller 4-1143**Director, Audit Services
- ❖ **Tasha Osafo 4-3047**Director, Compliance Education, Risk and Data Services
- ❖ **Mia London 4-3858**Program Manager, Education and Outreach