

For telehealth visits conducted during the COVID-19 PHE, Attendings, APPs, and Housestaff should follow workflows described in this document for selecting attestation statements. Additional resources include: [Demo Videos](#), [COVID-19 Provider Billing Tip Sheet](#), [ProviderTelehealth FAQs](#), & [Medical Student Attestation Tip Sheet](#). Questions may be emailed to [compliance@bsd.uchicago.edu](mailto:compliance@bsd.uchicago.edu).

**BRIEF WORKFLOW :** Descriptions of the attestations and smart phrases are in the bottom table. (See p.2 for detailed workflow with attestations and smart phrases)

OUTPATIENT WORKFLOW

INPATIENT WORKFLOW

Scenario 1 APP/ATTENDING alone	Scenario 2 Housestaff and Attending	Scenario 1 APP/ATTENDING alone	Scenario 2 Housestaff and Attending
1. Select master attestation: <b>ATTTELEHEALTHOUTPATIENT</b>  2. Select Smart Text <b>ATTTELEHEALTH_PROVIDER</b>  3. Complete Video or Telephone statement  <b>Demo Video:</b> <a href="#">Outpatient - Housestaff, APP or Attending providing service to outpatient</a>	1. HouseStaff A. Select master attestation: <b>ATTTELEHEALTHOUTPATIENT</b> B. Select Smart Text: <b>ATTTELEHEALTH_PROVIDER</b> C. Complete Video or Telephone statement D. Route note to Attending  2. Attending A. Select master attestation: <b>ATTTELEHEALTHOUTPATIENT</b> B. Select appropriate Smart Text: <ul style="list-style-type: none"> <li><b>ATTTELEHEALTH_TEACHING_PHYSICIAN</b>—complete video or telephone statement</li> <li><b>ATTTELEHEALTH_PCE_TEACHING-PHYSICIAN</b></li> </ul> <b>Demo Videos:</b> <a href="#">Outpatient - Teaching Physician supervising PCE Housestaff</a> <a href="#">Outpatient - Teaching Physician supervising Housestaff</a>	1. Select master attestation: <b>ATTTELEHEALTHINPT</b>  2. Select Smart Text: <b>ATTTELEHEALTH_IP_PROVIDER</b>  3. Complete Video or Telephone statement  <b>Demo Video:</b> <a href="#">Inpatient - Housestaff, APP or Attending providing service to inpatient</a>	1. HouseStaff A. Select master attestation: <b>ATTTELEHEALTHINPT</b> B. Select Smart Text: <b>ATTTELEHEALTH_IP_PROVIDER</b> C. Complete Video or Telephone statement D. Route note to Attending  2. Attending A. Select master attestation: <b>ATTTELEHEALTHINPT</b> B. Select Smart Text: <b>ATTTELEHEALTH_IP_TEACHING_PHYSICIAN</b>  <b>Demo Video:</b> <a href="#">Inpatient - Teaching Physician supervising Housestaff</a>

MASTER ATTESTATION	SMART TEXT DESCRIPTION
<b>.ATTTELEHEALTHOUTPATIENT</b> (For outpatient telehealth)	<b>ATTTELEHEALTH_PROVIDER</b> (For Housestaff, APP, and Attending not supervising Housestaff) The {PATIENT/SURROGATE:935} participated in the encounter via {Video/Telephone}. Identity was verified by name and {identityconfirmation:931}. Verbal consent for the visit was provided.
	<b>ATTTELEHEALTH_TEACHING_PHYSICIAN</b> (For Teaching Physician supervising Housestaff) I {DID/DID NOT} participate in the key portions of the encounter performed via {Video/Telephone}. After discussion with Dr. ***. I agree with the house staff's note {as written / with exception:20717}.
	<b>ATTTELEHEALTH_PCE_TEACHING_PHYSICIAN</b> (For Teaching Physician supervising PCE Housestaff) I discussed this encounter with Dr. ***, which included a review of the patient's medical history, diagnosis, and treatment plan. I agree with the assessment and plan {as written/with exception:20717}. The encounter was conducted via {Video/Telephone}.
<b>.ATTTELEHEALTHINPT</b> (For inpatient telehealth)	<b>ATTTELEHEALTH_IP_PROVIDER</b> (For Housestaff, APP, and Attending not supervising Housestaff) I {DID/DID NOT} participate in key portions of the encounter via [Video/Telephone].
	<b>ATTTELEHEALTH_IP_TEACHING_PHYSICIAN</b> (For Teaching Physician supervising Housestaff) I {DID/DID NOT} participate in the key portions of the encounter performed via {Video/Telephone}. After discussion with Dr. ***. I agree with the house staff's note {as written / with exception:20717}.
<b>VIDEO STATEMENT</b>	For video inpatient and outpatient encounters I spent a total of *** minutes in care of this patient on [DATE PATIENT WAS SEEN BY ME:22094524] . {More/Less} than 50% of time was spent in counseling and/or coordination of care . I {was/was not} onsite.
	For telephone outpatient encounters I spent *** minutes on the telephone with the patient on the date of this encounter. I {was/was not} onsite.
<b>TELEPHONE STATEMENT</b>	For telephone inpatient encounters I spent *** minutes on the telephone with the patient on the date of this encounter. I spent a total of *** minutes in care of this patient on [DATE PATIENT WAS SEEN BY ME:22094524] . {More/Less} than 50% of time was spent in counseling and/or coordination of care. I {was/was not} onsite.

**DETAILED WORKFLOW WITH ATTESTATION STATEMENTS & SMART PHRASES**

OUTPATIENT WORKFLOW		INPATIENT WORKFLOW	
SCENARIO 1 APP/ATTENDING provides telehealth service to outpatient alone	SCENARIO 2 Housestaff and Attending provide telehealth service to outpatient	SCENARIO 3 APP/ATTENDING provides telehealth service to inpatient alone	SCENARIO 4 Housestaff and Attending provide telehealth service to inpatient
<p>1. APP/Attending selects .ATTTELEHEALTHOUTPT</p> <p>2. APP/Attending selects ATTTELE-HEALTH_PROVIDER: <b>The {PATIENT/SURROGATE:935}</b> participated in the encounter via {Video/ Telephone}. Identity was verified by name and {identityconfirmation:931}. Verbal consent for the visit was provided.</p> <p>3. APP/Attending completes applicable Video or Telephone statement below:</p> <p>A. Video: I spent a total of *** minutes in care of this patient on [DATE PATIENT WAS SEEN BY ME:22094524] . {More/Less} than 50% of time was spent in counseling and/or coordination of care . I {was/was not} onsite.</p> <p>B. Telephone: I spent *** minutes on the telephone with the patient on the date of this encounter. I {was/was not} on-site.</p> <p style="text-align: center;"><b>FINISHED</b></p>	<p>1. Housestaff selects .ATTTELEHEALTHOUTPT</p> <p>2. Housestaff selects ATTTELEHEALTH_PROVIDER: <b>The {PATIENT/SURROGATE:935}</b> participated in the encounter via {Video/ Telephone}. Identity was verified by name and {identityconfirmation:931}. Verbal consent for the visit was provided.</p> <p>A. If VIDEO is selected, also complete: I spent a total of *** minutes in care of this patient on [DATE PATIENT WAS SEEN BY ME:22094524] . {More/Less} than 50% of time was spent in counseling and/or coordination of care . I {was/was not} onsite.</p> <p>B. If TELEPHONE is selected, also complete: I spent *** minutes on the telephone with the patient on the date of this encounter. I {was/was not} onsite.</p> <p>3. Housestaff routes note to Attending</p> <p>4. Attending selects .ATTTELEHEALTHOUTPT</p> <p>5. Attending selects appropriate Teaching Physician statement:</p> <p>A. ATTTELEHEALTH_Teaching_Physician I {DID/DID NOT} participate in the key portions of the encounter performed via {Video/ Telephone}. After discussion with Dr. **. I agree with the house staff's note {as written / with exception:20717}.</p> <p>Complete applicable Video or Telephone statement below:</p> <p>VIDEO: I spent a total of *** minutes in care of this patient on [DATE PATIENT WAS SEEN BY ME:22094524] . {More/Less} than 50% of time was spent in counseling and/or coordination of care . I {was/was not} onsite.</p> <p>TELEPHONE: I spent *** minutes on the telephone with the patient on the date of this encounter. I {was/was not} onsite.</p> <p>B. ATTTELEHEALTH_PCE_TeachingPhysician: I discussed this encounter with Dr. **, which included a review of the patient's medical history, diagnosis, and treatment plan. I agree with the assessment and plan {as written/with exception:20717}. The encounter was conducted via {Video/Telephone}.</p> <p style="text-align: center;"><b>FINISHED</b></p>	<p>1. APP/Attending selects .ATTTELEHEALTHINPT</p> <p>2. APP/Attending selects ATTESTELEHEALTH_IP_Provider: I {DID/DID NOT} participate in key portions of the encounter via [Video/ Telephone].</p> <p>3. APP/Attending completes applicable Video or Telephone statement below:</p> <p>A. Video: I spent a total of *** minutes in care of this patient on [DATE PATIENT WAS SEEN BY ME:22094524] . {More/Less} than 50% of time was spent in counseling and/or coordination of care . I {was/was not} onsite.</p> <p>B. Telephone: I spent *** minutes on the telephone with the patient on the date of this encounter. I spent a total of *** minutes in care of this patient on [DATE PATIENT WAS SEEN BY ME:22094524] . {More/Less} than 50% of time was spent in counseling and/or coordination of care. I {was/was not} onsite.</p> <p style="text-align: center;"><b>FINISHED</b></p>	<p>1. Housestaff selects .ATTTELEHEALTHINPT</p> <p>2. Housestaff selects ATTESTELEHEALTH_IP_Provider : I {DID/DID NOT} participate in key portions of the encounter via [Video/ Telephone].</p> <p>3. Housestaff completes applicable Video or Telephone statement below:</p> <p>A. Video: I spent a total of *** minutes in care of this patient on [DATE PATIENT WAS SEEN BY ME:22094524] . {More/Less} than 50% of time was spent in counseling and/or coordination of care . I {was/was not} onsite.</p> <p>B. Telephone: I spent *** minutes on the telephone with the patient on the date of this encounter. I spent a total of *** minutes in care of this patient on [DATE PATIENT WAS SEEN BY ME:22094524] . {More/Less} than 50% of time was spent in counseling and/or coordination of care. I {was/was not} onsite.</p> <p>4. Housestaff routes note to Attending</p> <p>5. Attending selects .ATTTELEHEALTHINPT</p> <p>6. Attending selects ATTTELEHEALTH_IP_TEACHING_PHYSICIAN : I {DID/DID NOT} participate in the key portions of the encounter performed via {Video/Telephone}. After discussion with Dr. **. I agree with the house staff's note {as written / with exception:20717}.</p> <p>7. Attending completes applicable Video or Telephone statement below:</p> <p>A. Video: I spent a total of *** minutes in care of this patient on [DATE PATIENT WAS SEEN BY ME:22094524] . {More/Less} than 50% of time was spent in counseling and/or coordination of care . I {was/was not} onsite.</p> <p>B. Telephone: I spent *** minutes on the telephone with the patient on the date of this encounter. I spent a total of *** minutes in care of this patient on [DATE PATIENT WAS SEEN BY ME:22094524] . {More/Less} than 50% of time was spent in counseling and/or coordination of care. I {was/was not} onsite.</p> <p style="text-align: center;"><b>FINISHED</b></p>