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Appropriate Use of GC Modifier When Billing Ambulatory E/M Services

What is the definition of a GC Modifier?

A GC Modifier is a modifier added to a CPT code for service(s) performed in part by a resident under the direction of a teaching physician (TP).

When should the GC modifier be used?

A GC Modifier is used when a resident, under the direction of a teaching physician, is involved in the management and care of a patient.

For each encounter, the selection of the appropriate level of E/M service should be determined according to the code definitions in the American Medical Association's Current Procedural Terminology (CPT) and any applicable documentation guidelines.

For the purpose of payments for E/M service(s) billed by teaching physicians an attestation statement is required. The attestation statement by the teaching physician must include: *That he/she performed the service or was physically present during the key or critical portions of the service when performed by the resident; and the participation of the teaching physician in the management of the patient.*

The resident stating the presence and participation of the teaching physician alone is not sufficient documentation to establish the presence and participation of the teaching physician. The teaching physician's attestation is required when involving a resident in the management and care of a patient.

On medical review, the combined entries into the medical record by the teaching physician and the resident constitute the documentation for the service and together must support the medical necessity of the service (CMS).

Here is a scenario from CMS regarding the GC Modifier:

The resident performs the elements required for an E/M service in the presence of, or jointly with, the teaching physician and the resident documents the service. In this case, the teaching physician must document that he/she was present during the performance of the critical or key portions of the service and that he/she was directly involved in the management of the patient. The teaching physician's note should reference the resident's note. For payment, the composite of the teaching physician's entry and the resident's entry together must support the medical necessity and the level of the service billed by the teaching physician.

Copy and Paste: Walking a Tightrope between Efficiency in Patient Care and Documentation Integrity

The purpose of adopting an electronic health record (EHR) is to facilitate the improvement of quality patient care. The Centers for Medicare & Medicaid Services (CMS) believe that the EHR will reduce errors, delays in treatment, and improve the accuracy and clarity of medical records (cms.gov). However, certain functionalities within the EHR



have the potential to work against these goals rather than reach them. An EHR functionality that has been under high scrutiny is the ability to carry forward or copy and paste (i.e. clone) information from previous patient encounters. CMS considers documentation to be cloned “when each entry in the medical record for a beneficiary is worded exactly alike or similar to the previous entries.” When using information obtained from your previous encounters in the current encounter it is imperative assure the accuracy of the information as it relates to the current patient encounter. Safeguards can also be taken by specifying what information was previously obtained and what information was obtained during the current encounter.

SLUCare Policy 8-117 states:

Copying and Pasting: Copying and pasting previously documented notes or graphics into a new location is strongly discouraged and should be done with the utmost care, knowing that a physician pasting previous documentation is unequivocally stating that the given text or graphics are correct and appropriate. Accordingly, the physician who copies and pastes within the record assume complete authorship of the material so copied and pasted. Therefore this technique is appropriately used in the electronic health record only by the note’s original author.

HIPAA Awareness & Information Security Awareness Training

All workforce members who have access to patient information are required to complete these mandatory online education sessions.

If these trainings still appear on the “Compliance Requirements” section of your mySLU homepage you are considered delinquent and your department Chairman has been notified.

Instructions for accessing and completing the course are available on the Compliance website. (NOTE: *The video playback speed can be adjusted at the bottom on the Tegrity player.*)

******Use Google Chrome to access the courses******

SLUCare Physicians and University Researchers Asked to Submit Disclosure Statements

As part of the University's commitment to strive for the highest standards of professionalism while maintaining interactions with the industries impacting the health care system, the School of Medicine adopted the [Policy on Medical Center Conflicts of Interest in Patient Care and Service](#). The policy asks that all SLUCare physicians submit a disclosure statement on their financial dealings with health care product companies.

All physicians are asked to answer a short series of questions about "gifts and transfers of value" from health care product companies between January 1 through December 31, 2014.

The purpose of the disclosure statement is to identify gifts, pharmaceutical supplies (other than sample medications intended for routine clinical use), food, fiduciary interests and personal compensation earned by physicians from companies operating within the health care system. The move to provide financial transparency in such transactions is part of the University's ongoing efforts to manage conflicts of interest.

The disclosure can be found on the Compliance website <http://www.slu.edu/general-counsel-home/compliance/sunshine-act> and should be **submitted by April 1, 2015**. Questions regarding the disclosure can be directed to Kerry Borawski at kborawsk@slu.edu or 314-977-7720.

In addition, the Division of Research Administration has initialized the 2015 electronic Conflict of Interest (eCOI) disclosure for all individuals involved in the design, conduct, or reporting of externally sponsored research. The [Financial Conflict of Interest in Research Policy](#) requires annual disclosure of external financial interests that reasonably appear to be related to the investigator's institutional responsibilities and/or sponsored activities.

The Research eCOI disclosure is due March 29, 2015. [Here are step-by-step instructions](#) for completing the eCOI disclosure. Questions regarding Research eCOI disclosure or the Financial COI in Research Policy can be directed to Libby Tempel at COI@slu.edu or 314-977-7047.



Please feel free to contact the Office of University Compliance at (314) 977-5545 or at slucompliance@slu.edu



If you need to reference past newsletters, upcoming education dates or need more information on Compliance visit our [website](#).