UCDHS COMPLIANCE OFFICE
Clarification Guidance

Topic:  Timing of Linking Language

Date Issued:   April 2, 2009

When an attending links to a resident note from a different calendar date, it is acceptable to allow a different calendar date between the resident document and the attending documentation for which an attending has provided acceptable linking language (see P&P 1928).

The attending billing for personal services is tied to the actual date that the attending saw the patient or "date the services were rendered by the billing provider". It is acceptable to allow the attending to link to the resident note even if the resident note occurred on the day before, e.g., 11:00PM consult initiated; attending sees patient next morning at 9:00am and documents. In this case, the consultation is billable using the attending physician’s date of service and the resident’s note if appropriately linked by the attending.

It is important to note, Medical Staff By-Law requirements and UCDHS Policies and Procedures associated with medical record documentation requirements and other requirements pertaining to timing for documentation, content, and other applicable standards must be met, i.e., inpatient H&Ps must be documented within 24 hours (medical staff bylaws and conditions of participation).

References:
For inpatient claims, the date of discharge is used as the date to determine valid medical codes, and other codes that are dependent upon service date for validity. For outpatient claims, the actual date that the service was rendered is reported with the service item at the line level, and used to determine valid medical codes and other codes that are subject to service.
https://questions.cms.hhs.gov/

Noridian FAQ:
Q: How do I bill a service when the resident sees the patient on a different calendar date from the teaching physician, such as late night admissions?

A: "Scenario: A physician sees a patient in the Emergency Room shortly before midnight. The patient is evaluated in the emergency room and the emergency room physician bills for an emergency department evaluation and management (E/M) service. The resident is then notified. The resident performs some or all of the required elements of the initial hospital care service in the absence of the teaching physician and documents his/her service and calls the teaching physician. The resident receives admitting orders by phone. The patient is admitted on day one shortly before midnight. The teaching physician does not see the patient until day two. Can the teaching physician use the admission date as the initial hospital care date of service (DOS) even though the teaching physician did not see the patient until day two?

Response: No! "The teaching physician must bill the service for the date on which he or she performs it. The teaching physician independently performs the critical or key portion(s) of the service with or without the resident present and, as appropriate, discusses the case with the resident. In this instance, the teaching physician must document that he/she personally saw the patient, personally performed critical or key portions of the service, and participated in the management of the patient. In the example, this occurs on day two and therefore the date of service is this second day The teaching physician’s note may reference the resident’s note, in which case the composite of the teaching physician’s entry and the resident’s entry together must support the medical necessity of the billed service and the level of the service billed by the teaching physician.” Noridian Administrative Services FAQ 5/24/2007
This document is intended for University of California Davis Health System and is the opinion of UCDHS Compliance department, based on the indicated references as of the date of the document. It is the sole responsibility of the recipient to follow any changes to the state and federal regulations that may affect this opinion.