

Split/Shared Visits

When a physician and midlevel are both involved in a patient's care, there are specific criteria for documentation in order for the physician to be listed as the primary provider.

The CMS policy states.

*"A split/shared E/M visit is defined by Medicare Part B payment policy as a medically necessary encounter with a patient where the **physician and a qualified NPP each personally perform a substantive portion of an E/M visit** face-to-face with the same patient on the same date of service. A substantive portion of an E/M visit involves all or some portion of the history, exam or medical decision making key components of an E/M service."*

The physician should document patient specific information for the following areas of the chart:

- History
- Exam
- Medical decision making.

In addition, it must be noted that the mid-level documentation was reviewed and agreed with, this can be done in a blanket attestation statement (Macro.)

Example of acceptable attestation from the physician:

The patient presents with left-sided chest pain for two weeks. Somewhat tender to palpation. Seen in urgent care, referred here due to a concern over possible blood clot. Does have tenderness to palpation across the left anterior chest but clear lungs and normal heart sounds. D-dimer is slightly elevated. The other labs are normal. Chest x-ray is clear. Will proceed with CT for PE. If negative the patient will be able to be discharged home. Does appear to be quite stable.

I have reviewed the non-physician practitioner's documentation and am in agreement, met with the patient face to face, made the diagnosis, and the medical decision making was done by me.

Dr X