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PALMETTO GBA
A CELERIAN GROUP COMPANY

Responding to a Request for Evaluation and Management (E/M) Services Records

This check list is provided as a reminder of what to include when responding to a request for records. The documentation should include, but is not limited to:

- Name of beneficiary and date of service on all documentation
- Documentation legible and complete (including signature(s))
- Abbreviation key (if applicable)
- Appropriate signature(s)
- Physician's/nonphysician practitioner's (NPP) orders (if applicable)
- Test results (if applicable)
- Physician progress notes (new/comprehensive patients require 3 out of 3 key components and established patients require 2 out of 3 key components). Key components:
 - History
 - Examination
 - Medical Decision Making
- Documentation based on counseling/coordination of care:
 - Total time
 - Amount or percent of time involved in counseling /coordinating care
 - Description of counseling/coordination of care (must be sufficient)
- The service was documented by a scribe:
 - Name of scribe
 - Notation that the physician/NPP reviewed the documentation for accuracy
 - Provider's signature
- The service was performed split/shared:
 - Office/Clinic:
 - Service performed by physician and NPP
 - Incident-to guidelines were met
 - NPP **or** physician's signature
 - Hospital Inpatient/Outpatient/Emergency Department Setting:
 - NPP and physician are members of the same group (Palmetto GBA must be able to verify this information)

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- Physician had face-to-face visit on the same date of service
- Physician documented a substantive portion of the E/M visit
- Signature from billing provider
- The service was performed by a teaching physician:
 - Documentation from resident
 - Documentation from teaching physician:
 - Personally documented he/she performed the service or was physically present during the key or critical portions of the service when performed by the resident
 - Participation in the management of the patient
 - Teaching physician's note references or links to the resident's note
 - Notes are tailored to visit (check boxes alone are not sufficient)
- Billed with CPT modifier 24:
 - Documentation that supports the service is not related to the postoperative care of the procedure
- Billed with CPT modifier 25:
 - Documentation that supports the service is significant and separately identifiable from the usual work associated with the surgery
- Billed with CPT modifier 57:
 - Documentation that supports the E/M service resulted in the decision to perform the procedure
- Any documentation supporting medical necessity

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