

Compliance Issues for which CAFM, AAMC and AAPA are seeking confirmation regarding the new *E/M Service Documentation Provided by Students* requirements included in Transmittal 3971, published on Feb 2, 2018:

Application to Nurse Practitioner (NP) and Physician Assistant (PA) Students:

The historic transmittal language does not stipulate “medical” students, but rather uses the term “student.” Current practice considers NP and PA in training as “students” under the teaching physician rule. The teaching physician (TP) has been able to use both NP and PA students’ as well as medical students’ review of systems and past family/social history for their documentation. Since the change introduced on Feb 5th (Transmittal 3971) did not change the terminology of “student” to medical student, we assume that the Teaching Physician may use the rest of the documentation these students provide – appropriately verified, services performed or re-performed by the Teaching Physician, and edited as necessary with attestation to that effect. **Please confirm that NP and PA students are included as “students” for documentation purposes.**

Application to Nurse Practitioner and Physician Assistant Providers:

The language of the transmittal, claims processing manual (current and historical) and the teaching physician guidelines states that a teaching physician is “a physician (other than another resident) who involves residents in the care of his or her patients.” Therefore, the change in the manual does not allow PAs or NPs to use a medical student note.

However, literally thousands of licensed PAs and NPs have and continue to serve as clinical preceptors to PA and NP students. It is essential that the reduction of administrative burdens as set forth in the student document manual update apply to PA and NP preceptors so that they are incentivized to continue to precept PA and NP students. **Therefore, we request that CMS make an additional change to the manual instructions to allow PAs and NPs to use notes of students, other than those of medical students, as long as they meet the same requirements as teaching physicians, i.e., they verify all student documentation in the medical record and personally perform or re-perform the physical exam and/or medical decision making activities of the E/M service.**

Appropriate Use of Physical Presence Requirement:

In clinical education, students usually first enter the room with a patient to perform a history and physical exam. This allows the student to progressively gain the independent experiences he or she will need as a resident or licensed PA or NP. The TP is always providing appropriate supervision and can enter the room to take over care at any time. The TP always reconfirms and personally re-performs the history, physical exam, and medical decision making services in the physical presence of the patient. **Please confirm that the TP can use appropriately verified student documentation to support an E&M charge if the student first performs the history and examination without the TP, then discusses the case with the TP outside the patient’s room, they both return to see the patient where the TP verifies all student documentation in the medical record and personally re-performs the physical exam, and medical decision making services used to support an E&M charge.**

In a slightly different scenario, the student does not always return to the room with the TP. When the student does not return, the TP has heard the full presentation by the student and always verifies student documentation in the medical record and personally performs or re-

performs the physical exam, and medical decision making activities. **Please confirm that the in this scenario, the changes to the *E/M Service Documentation Provided by Students* apply.**

Role of the Resident and Its Impact on Documentation Requirements

Please confirm that the revised student documentation guidelines apply to all sites of service where a student is present with a teaching physician regardless of whether a resident is involved. We request below that CMS ensure that this also applies when a PA, NP, or health professional precepts students for activities within his/her scope of practice and likewise would apply in all sites of service.

A question arises that is not specifically addressed in the transmittal related to the role of documentation by medical residents when a student also is involved in the service. . Residents frequently teach students and as part of their education, students often document the service. The manual states that:

“any contribution and participation of a student to the performance of a billable service (other than the review of systems, and/or past family/social history which are not separately billable, but are taken as part of an E/M service) must be performed in the physical presence of a teaching physician or physical presence of a resident. . .”

The revision to the student documentation requirements has not changed the requirement regarding resident documentation for an E&M service, which is that the teaching physician must personally document: (1) his/her presence during the key or critical portions of the service performed by the resident and (2) participation in the management of the patient. However, **to further reduce documentation burden on the teaching physician, we request that the manual instructions be revised to eliminate the requirement for personal documentation of an E/M service by the teaching physician when a resident is involved in the service as follows:**

- **If a student and a resident are involved, the teaching physician must attest to the accuracy and content of the student note as reviewed and revised by the resident, be physically present with the resident during the key or critical part of the service, and participate in the management of the patient.**
- **If only a resident and teaching physician are involved, the teaching physician must attest to his/her physical presence during the key or critical part of the service, participation in the management of the patient, and that the resident note was reviewed and he/she agrees with (or has revised) that note.**

When billing under the primary care exception, current CMS policy requires that the teaching physician review the care provided by the resident either during or immediately after each visit and document the extent of his/her participation in the review and direction of the services furnished to the patient. **We ask CMS to clarify that documentation in the medical record by the resident may include a student’s documentation. The teaching physician must review and attest to the accuracy of the student note, as reviewed and revised by the resident.**

Submitted by CAFM, AAMC, AAPA
March 21, 2018