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Applicability: UNCHCS - All except Nash

# Medical Student Participation and Documentation in the EHR and the Use of Medical Student Notes by Physicians and Advanced Practice Providers

## APPLICABILITY:

**This policy applies to the following entities** (collectively referred to as "UNC Health Care System" or "UNCHCS" in this policy):

✓	UNC Health Care System/UNC Hospitals	✓	Johnston Health
✓	UNC Physicians Network	✓	Lenoir Memorial Hospital
✓	UNC Physicians Network Group Practices	✓	Margaret R. Pardee Memorial Hospital
✓	Rex Healthcare / Rex Hospital		Nash Healthcare System / Nash Hospitals
✓	Chatham Hospital	✓	Wayne Memorial Hospital
✓	Caldwell Memorial Hospital		
✓	UNC Rockingham Health Care / UNC Rockingham Hospital		

\*UNC Medical Center includes all UNC Hospitals' facilities and the clinical patient care programs of the School of Medicine of UNC-Chapel Hill (including UNC Faculty Physicians).

# I. Description

This policy describes the use of medical students to document medical care and health-related data on behalf of the resident and/or teaching physician in the Electronic Health Record (EHR). This policy also describes the use of medical student notes by physicians and advanced practice providers (APPs).

This policy applies to clinical medical students participating in clinical rotations at UNCHCS or applicable UNCHCS affiliated Network Entities (see definition of "student" herein).

## II. Rationale

It is the policy of the University of North Carolina School of Medicine ("UNC SOM"), the UNC Health Care System ("UNCHCS"), and applicable Network Entities affiliated with UNCHCS to provide opportunities for

medical students to participate in patient care functions as much as possible including appropriate use of the EHR consistent with regulatory requirements, including those of The Joint Commission and the Centers for Medicare and Medicaid Services (CMS). The ability to document appropriately is an essential skill that allows medical students to more fully participate in patient care, organize their thinking related to patient problems, and demonstrate clinical reasoning.

# **III. Definitions**

**Student** – an individual who participates in an accredited educational program (e.g., a medical school) that is not an approved Graduate Medical Education (GME) program. A student is never considered to be an intern or a resident. Medicare does not pay for any service furnished by a student.

# **Policy**

#### A. Access

When using Epic@UNC or another electronic medical record system (collectively, "EHR"), medical students will log in under a unique username and password and may document in specific areas (as noted in Sections B and C below). The student will not share the login/password of a resident, teaching physician, or anyone else.

"Copy Paste/Carry Forward" functionality and use should be consistent with the <u>Copying and Pasting and Data Replication in Electronic Documentation policy</u>.

- B. Medical Student Use of the EHR Ambulatory Setting
  - 1. *Orders:* When clinically appropriate, medical students and acting interns may enter pending orders (in the "Meds & Orders" section of Epic@UNC) for patients in an ambulatory clinic.

Before nursing staff or other health care providers will honor an order, a physician or APP member of the patient's team, who is licensed to practice in North Carolina, shall sign the order.

Medical students may not give verbal orders.

- 2. Add/Update Past, Family and/or Social History (PFSH), Review of Systems (ROS): The medical student may add/update past, family, and social history and review of systems in order to update their patient's EHR. These areas may be completed during the "rooming in" process for the patient in the ambulatory setting. Physicians and APPs may import this information into their own documentation using EHR functionality such as smart links. However, the physician or APP is responsible for confirming the information and authenticating their note. If this information is used as part of the patient's History and Physical (H&P), the physician or APP who authenticates the H&P is responsible for its contents.
- 3. Problem List: The medical student may update their patient's problem list.
- 4. **Medication History:** The medical student may update the patient's medication history within the Medication Tab within Epic@UNC during the "rooming in" process. This may include indicating the medications the patient is taking, not taking, or notating whether the medications are unknown.
- 5. Transcribing External Test Results: The medical student may view and transcribe external test results in the "Enter/Edit Results" activity section of Epic@UNC to document a patient's outside health maintenance records. Please review the Epic@UNC Tip Sheet "Heath Maintenance Basics"

and section "Documenting Outside Results to Satisfy Health Maintenance."

- 6. **Schedule**: The medical student may update visit-planning comments in the patient's schedule.
- 7. **Scribing:** Medical students may participate in scribing. Medical students must follow procedures outlined in the <u>Documentation of Care and Health-Related Data by Scribes policy</u>.

#### C. Medical Student Use of the EHR - Inpatient Setting

Orders: When working in Epic@UNC, and when clinically appropriate, medical students may enter
pending orders through the "Save Work" button in the "Orders" activity section during the admission,
daily hospital care, or discharge process.

Before the nursing staff or other healthcare providers will honor orders, a physician or APP member of the patient's team, who is licensed to practice in North Carolina, shall sign the order.

Medical students cannot give verbal orders.

- 2. **Facilitating Care Team Communication:** Within the "Summary" activity section of Epic@UNC, the medical student may update their patient's daily plan on the sign out list **before** leaving each day and add service-specific data (e.g., weight bearing on trauma) to the sign out list.
- 3. Add/Update Past, Family and/or Social History (PFSH), Review of Systems (ROS): The medical student may add/update past, family, and social history and review of systems in order to keep their patient's EHR updated. In the "Admission" activity button, the medical student may complete the PFSH and ROS during the admission process. Physicians and APPs may import this information into their own documentation using EHR functionality such as smart links. However, the physician or APP is responsible for confirming the information and authenticating their note. If this information is used as part of the patient's History and Physical, the physician or APP who authenticates the H&P is responsible for its contents.
- 4. **Problem List:** Medical Students may update their patient's problem list.
- 5. **For Inpatients, Contribute to the Hospital Course:** Within the "Discharge" activity tab, the medical student may contribute to the patient's hospital course and keep this updated for their patients.
- 6. Medication History: Within Epic@UNC, the medical student may use Admission, Discharge, Transfer (ADT) navigators to pend medication reconciliation for Admissions and Discharges on their inpatients. On the "Admission" activity tab, the medical student may pend medications using the "Med/Rec-Pend" button. On the "Discharge" activity tab, the medical student may use the "Medication Reconciliation" button which pends the order until the order is signed by the physician or APP.
- 7. **Scribing:** Medical students may participate in scribing. Medical students must follow procedures outlined in the <u>Documentation of Care and Health-Related Data by Scribes policy</u>.
- 8. After Visit Summary: Medical students may participate in creating the patient After Visit Summary.
- D. Use of Medical Student Notes by Physicians and Resident Physicians (This section does not apply to APPs)

CMS has promulgated specific rules related to medical students.

- 1. Use of Student's Contribution Toward a Billable Service:
  - a. Any contribution and participation of a student to the performance of a billable service (other

than the ROS and/or PFSH which are not separately billable, but are taken as part of an Evaluation and Management (E/M) service) must be performed in the physical presence of a teaching physician or physical presence of a resident physician that meets teaching physician billing requirements.

- b. Students may document services in the medical record. However, the **teaching physician** must verify in the medical record all student documentation or findings, including history, physical exam and/or medical decision-making. The **teaching physician** must personally perform (or reperform) the physical exam (PE) and medical decision making (MDM) activities of the E/M service being billed, but may verify any student documentation of them in the medical record, rather than re-documenting this work.
- c. Only a physician may use medical student notes toward a billable E/M visit. This policy does not apply to other students (e.g., NP/PA students), Nurse Practitioners, or Physician Assistants.
- d. **Primary Care Exception setting**: Teaching physicians may not use medical student documentation toward their billable E/M (other than the student's documentation of ROS or PFSH) in a primary care exception setting unless the teaching physician personally sees the patient and meets the requirements in 1a and 1b above.

#### 2. Authentication:

- a. **Medical Student:** The medical student must document their contribution to the medical record. The documentation must include the student's name and title (Medical Student).
- b. Resident Physician: When meeting the requirements of 1a to 1b above, the resident physician must authenticate their documentation and use the Epic@UNC approved attestation (see 2d below).
- c. **Teaching Physician:** When meeting the requirements of 1a to 1b above, the teaching physician must authenticate the medical student note and add an approved Epic@UNC attestation indicating that they were physically present with the student, verified all student documentation, and performed (or re-performed) the PE and MDM (see 2d below).

The teaching physician must also use the applicable teaching attestations when a resident physician is participating in the patient encounter.

- d. An approved attestation is available in Epic@UNC under .ATTESTATIONUNCHCS for use with medical student notes:
  - "I attest that I have reviewed the student note and that the components of the history of the present illness, the physical exam, and the assessment and plan documented were performed by me or were performed in my presence by the student where I verified the documentation and performed (or re-performed) the exam and medical decision making."

# IV. References

Association of American Medical Colleges. (2014). *Allowing Medical Student Documentation in the Electronic Health Record*. Retrieved May 23, 2017, from <a href="https://www.aamc.org">https://www.aamc.org</a>.

Association of American Medical Colleges. (2011). *Electronic Health Records in Academic Health Centers: Topic 1: Medical Student Documentation*. Retrieved August 11, 2015, from <a href="https://www.aamc.org">https://www.aamc.org</a>.

The Centers for Medicare and Medicaid Services, E/M Service Documentation Provided by Students (Manual

*Update*), MLN Matters Article MM10412, revised June 1, 2018. Retrieved February 7, 2019, from <a href="https://www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNMattersArticles/">https://www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNMattersArticles/</a> Downloads/MM10412.pdf.

The Centers for Medicare and Medicaid Services, *Medical Review of Evaluation and Management (E/M) Documentation*, MLN Matters Article MM10627, released July 13, 2018. Retrieved February 7, 2019, from <a href="https://www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNMattersArticles/downloads/MM10627.pdf">https://www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNMattersArticles/downloads/MM10627.pdf</a>.

The Centers for Medicare and Medicaid Services, *Medicare Claims Processing Manual*, CMS Pub. 100-04, Chap. 12, Sec. 100.1.1 (Rev. 4068, May 31, 2018).

The Centers for Medicare and Medicaid Services, *Medicare Program Integrity Manual*, CMS Pub. 100-08, Chap. 6, Sec. 6.8.1 (Rev. 808, July 13, 2018).

The Joint Commission. *History and Physical – Medical Student*. Retrieved May 23, 2017, from <a href="http://www.jointcommission.org">http://www.jointcommission.org</a>.

# V. Related Policies

Copying and Pasting and Data Replication in Electronic Documentation

<u>Documentation of Care and Health-Related Data by Scribes</u>

Attachi	me	ents:				No Attachments		

# **Approval Signatures**

Step Description	Approver	Date
	Jerylyn Williams: VP Chief Audit & Comp Officer	07/2019
SYSTEM Site Administrator	Emilie Hendee: HCS-Sr Attorney	07/2019
	Robin Shuping: HCS Prof Compliance Dir	07/2019

### **Applicability**

Caldwell Memorial Hospital, Chatham Hospital, Johnston Health, Pardee Hospital, UNC Health Care System, UNC Lenoir Health Care, UNC Medical Center, UNC Physicians Network, UNC Rex Healthcare, UNC Rockingham Health Care, Wayne Memorial Hospital