Faculty Practice Plan
Teaching Physician Billing Policy
Medical Students

OVERVIEW:

Evaluation and Management Services:

- Medical Student may complete and document Review of Systems (ROS) and Past, Family, Social History (PFSH), which are segments of the History component of an E&M.

- The teaching physician may use a medical student's documentation for ROS and PFSH to support a billable service if the documentation is reviewed and either signed or referred to in the teaching physician's documentation.

- The teaching physicians must perform/obtain and document the History of Present Illness, Exam and Medical Decision-Making components of an E&M (if all are used to support a billable service).

Procedures

- Medical Students' contribution to the provision of a service may be billable if performed in the presence of the teaching physician (or in combination with a resident and a teaching physician following the Teaching Physician Billing Rules for residents and fellows).

- The teaching physician must be present for the entire procedure.

- The teaching physician's documentation must identify the procedure performed and document his/her presence and supervision for the entire procedure. The teaching physician may refer to the medical student's documentation for further details.

- Sample documentation templates:

  Present and supervised the entire (name of procedure). See medical student's note for further details.

  Signature: Teaching Physician

  Present and supervised the entire (name of procedure). (pertinent details of procedure and/or patient status.) See medical student's note for further details.

  Signature: Teaching Physician
PURPOSE

The purpose of this document is to provide a unified Faculty Practice Plan policy regarding submission of bills to third party carriers for teaching physician services where medical students are involved with the provision of these services. This policy is intended to comply with the HCFA Teaching Physician Billing Requirements. Each department is responsible for ensuring compliance with these policy requirements.

GENERAL POLICY

A medical student is never considered to be a resident, therefore the teaching physicians' physical presence and documentation requirements outlined in the FPP Teaching Physician Billing Rules for residents and fellows do not apply to service provided by medical students. Any contributions of a medical student to the performance of a billable service or procedure (other than the taking of the review of systems and past, family, social history in case of an evaluation and management service) must be performed in the physical presence of a physician or jointly with a resident in a service meeting the teaching physician billing policies for residents and fellows.

Evaluation and Management (E&M) Services:

Overview of E&M Services: There are three components to an E&M code: History (consisting of history of present illness, review of systems, and past, family and social history), Exam and Medical Decision-Making. New patient initial visit/consult E&M codes require that all three components be used to determine the billable E&M code (level of care). For established patients and/or subsequent care, only two of the three components are used to support the billable service.

Physical presence: The review of systems (ROS) and the past, family, and social history (PFSH) obtained by a medical student may be used to support a billable E&M service. For an E&M service requiring all three components, the teaching physician must be present and/or perform the history of present illness, exam, and the medical decision making components. The medical student may obtain (ROS) and the (PFSH), which if reviewed by the teaching physician, may be used to support the history component of the billable service. If the E&M component only requires two of the three components, the teaching physician need only perform/obtain two of the three components (history of present illness, exam or medical decision-making).

Documentation Evaluation and Management Services: The teaching physician does not need to re-document the ROS and PFSH, if well documented by a medical student. However, the teaching physician must perform and document
the history of present illness, exam and medical decision-making portion of the visit if these components are used to support the billable service.

The medical student documentation related to the ROS and PFSH may be used to support a billable service, if referred to by the billing physician (or a resident in the situation where the medical student, resident and faculty are involved in the service). The medical student’s documentation of history of present illness, physical exam findings and medical decision-making cannot be used to support a billable service.

Procedures:

**Physical Presence:** The teaching physician must be present for the entire procedure.

**Documentation:** At a minimum, the teaching physician must document that he or she was present for the entire procedure and identify the specific procedure(s) performed. In addition, the teaching physician may document pertinent details of the procedure and/or patient status. The teaching physician may refer to the medical student note for additional details of the procedure. Below are examples of acceptable documentation templates:

1. Present and supervised the entire (name of procedure). See medical student's note for further details.
   
   *Signature:* Teaching Physician

2. Present and supervised the entire (name of procedure). *(pertinent details of procedure and/or patient status.*) See medical student's note for further details.

   *Signature:* Teaching Physician