As CMS works to reduce burdensome regulatory requirements for teaching physicians, I urge the agency to take additional steps to eliminate unnecessary restrictions on student documentation of Evaluation and Management (E/M) services. Specifically, CMS should ensure that, in accordance with existing Medicare Claims Processing Manual definitions, teaching physicians only be required to verify — rather than re-perform — documentation generated by medical, physician assistant (PA), and nurse practitioner (NP) students. This will allow preceptors to train more students and improve the quality of care delivered to Medicare beneficiaries by both practicing and future clinicians.

Transmittal 3971 (subsequently Transmittal 4068) revised the Medicare Claims Processing Manual. This was a helpful step forward in reducing administrative burden by allowing teaching physicians to verify — rather than redocument — student documentation of E/M services and removing previous mentions of medical students. CMS should, in implementing this change, adhere to the definition of “student” in §100 of the Medicare Claims Processing Manual as “an individual who participates in an accredited educational program (e.g. [for example], a medical school) that is not an approved GME program,” which is necessarily inclusive of PA and NP students.

Incorrectly limiting the definition of “student” to medical students threatens to create a two-tiered system in which preceptors are unwilling to train PA and NP students due to the burden of required redocumentation of PA/NP student notes compared to verification of medical student notes. To promote access to clinical training opportunities for all health professions students while decreasing the burden on preceptors, I urge CMS to appropriately recognize the existing definition of “student.”