Debunking regulatory myths

Challenging misrepresentations

AMA’s regulatory myths series provides physicians and their care teams with resources to reduce guesswork and administrative burdens so the focus can be on streamlining clinical workflow processes, improving patient outcomes and increasing physician satisfaction.

Review the myths

The AMA provides regulatory clarification to physicians and their care teams in an effort to aid physicians in their day-to-day practice environment.

1 Two-factor authentication for prescriptions
   Is two-factor authentication required for all prescriptions?

2 Review of patient test results
   Must all test results be reviewed by patients’ primary care physician?

3 Admission, discharge and transfer (ADT) messages
   Must hospitals send ADT notifications to physicians’ EHR inbox?
4 EHR gag clauses

Can physicians openly discuss EHR issues?

5 Protected health information (PHI) disclosures

Does HIPAA require that health care providers obtain patient authorization to disclose PHI for treatment purposes?

6 Mental health

Must licensing/credentialing bodies probe into clinicians’ past mental health?

7 Home health agency plan of care (POC) certification

How should physicians sign home care plan of care certifications and recertifications?

8 Documenting time for each task during outpatient visits

Are physicians and other qualified health professionals required to document the time spent on each specific task associated with an outpatient visit?

9 Online patient reviews

Are physicians prohibited from responding to online patient reviews?

10 Preventive/wellness and evaluation and management (E/M) services
Can physicians bill for both preventive and E/M services in the same visit?

11 **EHR documentation**

Are clinical support staff required to log out of EHR between documentation?

12 **Verbal orders**

Are there regulatory prohibitions on the use of verbal orders?

13 **Ancillary staff and/or patient documentation**

Who on the care team can document components of E/M services and what is the physician required to do?

14 **Commercial health plans and E/M codes**

Are commercial health plans required to adopt revisions to the E/M codes?

15 **Computerized Provider Order Entry (CPOE)**

Can a nurse, certified medical assistant (MA) or non-credentialed staff enter orders in the EHR as requested by the physician?

16 **Extended prescription duration**

How does an extended prescription duration help your patients and your practice?

17 **Food and drink contamination in work spaces**
Who determines where physicians and other health care workers can eat or drink while at work?

18 **Medical student documentation**
Are teaching physicians required to re-document medical student entries in the patient record?

19 **Pain assessments**
Are clinicians required to ask patients about pain during every consultation, regardless of the reason for the visit?

Stay up to speed on how state and federal law apply to health insurer-related issues.

**Earn CME**

**Interested in debunking a regulatory myth?**

Contact us to share your regulatory myth.