At the 2017 Interim Meeting, the House of Delegates (HOD) referred Resolution 812-I-17, “Medicare Coverage of Services Provided by Proctored Medical Students,” for report back at the 2018 Annual Meeting. This resolution was introduced by the Michigan Delegation and asked that:

Our American Medical Association (AMA) amend Policy, H-390.999, “Payments to Physicians in Teaching Setting by Medicare Fiscal Intermediaries,” by addition as follows:

When a physician assumes responsibility for the services rendered to a patient by a medical student, a resident, or an intern, the physician may ethically bill the patient for services which were performed under the physician’s personal observation, direction, and supervision; and

Our AMA work with the Centers for Medicare & Medicaid Services (CMS) to require coverage of medical services provided by medical students while under the physician’s personal observation, direction, and supervision.

This report provides background on payments to physicians in teaching settings and medical students providing care.

BACKGROUND

In the Guidelines for Teaching Physicians, Interns, and Residents, CMS defines a student as an individual who participates in an accredited educational program (for example, medical school) that is not an approved Graduate Medical Education (GME) program and who is not considered an intern or a resident.1 Medicare does not pay for any services furnished by these individuals. Specifically, CMS only reimburses for services provided by licensed physicians, which medical students are not.

In the Guidelines, CMS also states that “any contribution and participation of a student to the performance of a billable service must be performed in the physical presence of a teaching physician or resident in a service that meets teaching physician billing requirements.”2 However, CMS has clarified that, although under Medicare services by students are not billable, teaching physicians can involve students in services they perform, and to the extent that the medical student is involved in procedures under the personal supervision of a teaching physician who is performing the service, there is no prohibition against the teaching physician billing for these services.3 Any contribution and participation of a student in the performance of a billable service must be
performed in the physical presence of a teaching physician or resident in service that meets
teaching physician billing requirements.

During the reference committee hearing, there was testimony from the Council on Medical
Education calling for Resolution 812 not to be adopted because of current CMS guidelines on
teaching physicians, and the current restrictions on reimbursing only for services provided by
licensed physicians.

DISCUSSION

In a teaching scenario, the teaching or supervising physician is making all of the medical decisions
and is supervising any procedures performed by the medical student. Therefore, it is logical that the
teaching or supervising physician will bill and be paid for the procedures or services. For billing
purposes, the physician must also be the individual to document the procedure, including the
medical student’s participation.

In addition, Resolution 812-I-17 raises concerns because it would allow non-licensed medical
students to bill for services. While the AMA has policy supporting payment for services rendered
to a patient by a resident or an intern, who are licensed, it would be unprecedented to include
medical students in this policy and advocate that CMS reimburse a non-licensed clinician.

Resolution 812-I-17 also raises liability concerns because it would allow physicians to bill for
services performed solely by medical students. In order to ensure physicians are not exposed to
increased liability, the AMA should not advocate that physicians be responsible for procedures that
were performed by medical students who were not overseen by a teaching or supervising physician.

Finally, adoption of Resolution 812-A-17 could blur the line between the learning environment,
where medical students pay tuition to cover the costs of being provided an education to become a
physician, and the practice environment, where licensed physicians are compensated for providing
their time and expertise educating medical students, as well as for treating patients. The Board’s
view is that these roles should remain separate.

RECOMMENDATION

The Board of Trustees recommends that Resolution 812-I-17 not be adopted and the remainder of
the report be filed.

Fiscal Note: None.

REFERENCES

Viewed on January 24, 2018 at https://www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-

2 Id.

3 University of Washington Medicine Guidance Document. Billing for Procedures when Medical Students