MODULE 7

Artificial Intelligence for the Modern Physician Advisor

Knowledge Check

1. Which statement best describes the appropriate role of Artificial Intelligence in Physician Advisor practice?

A. AI can replace Physician Advisor review when sufficient clinical information is available.

B. AI should function as a professional assistant while the Physician Advisor retains independent judgment and accountability.

C. AI should primarily be used to determine inpatient versus observation status.

D. AI should be limited to administrative tasks unrelated to clinical information.

2. A Physician Advisor is reviewing a 300-page medical record for a denied inpatient admission. Which use of AI is most appropriate?

A. Ask AI to determine whether the admission met inpatient medical necessity.

B. Ask AI to select the appropriate level of care and prepare the final recommendation.

C. Ask AI to organize the clinical course, identify severity and intensity indicators, and identify documentation gaps for Physician Advisor review.

D. Ask AI to determine whether the payer's denial was correct.

3. When PHI is involved, the Physician Advisor should:

A. Use any AI platform as long as the information is used for clinical purposes.

B. Use an organization-approved platform and follow applicable organizational policies and HIPAA requirements.

C. Use a personal AI account as long as the information is deleted afterward.

D. Avoid AI entirely.

4. Which prompt is most likely to produce a useful AI response?

A. "Review this chart."

B. "Is this patient inpatient?"

C. "Tell me what you think about this admission."

D. "Summarize this hospitalization chronologically, including significant findings, treatment, consultant recommendations, complications, and disposition."

5. AI identifies several documentation deficiencies that may weaken support for an inpatient admission. What should the Physician Advisor do next?

A. Automatically incorporate the AI recommendations into a physician query.

B. Ask the physician to add the missing documentation identified by AI.

C. Independently evaluate whether the identified issues are clinically relevant and whether clarification is appropriate.

D. Change the level of care based on the documentation deficiencies.

6. Which statement best describes AI-assisted level-of-care review?

A. AI provides a second medical opinion.

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B. AI can serve as a "second set of eyes" by organizing information and identifying issues requiring Physician Advisor consideration.

C. AI can make the final determination when established criteria are available.

D. AI should only be used after the Physician Advisor has made the level-of-care determination.

7. AI prepares an appeal letter that includes a CMS regulation supporting inpatient admission. What is the most appropriate next step?

A. Submit the appeal because AI-generated regulatory information is generally reliable.

B. Verify the regulatory reference independently before including it in the appeal.

C. Remove all regulatory references generated by AI.

D. Ask AI a second time whether the citation is correct.

8. Which of the following is an appropriate use of AI in denial management?

A. Independently deciding which denials should be appealed.

B. Determining whether a payer's medical necessity decision is legally valid.

C. Analyzing denial data for recurring payer, documentation, and service-line trends.

D. Automatically overturning internal level-of-care determinations.

9. A Physician Advisor uses AI to prepare Peer-to-Peer talking points. Who remains responsible for determining the clinical strategy and defending the admission?

A. The attending physician

B. The payer medical director

C. The AI platform

D. The Physician Advisor

10. Which statement best summarizes the central message of this module?

A. AI will eventually replace many Physician Advisor responsibilities.

B. AI should be avoided in decisions involving medical necessity.

C. AI is a force multiplier that can improve Physician Advisor efficiency while professional judgment and accountability remain with the Physician Advisor.

D. AI is most valuable when allowed to make independent recommendations.

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MODULE 7 - ANSWER KEY

1. B - AI is a professional assistant. Independent judgment and professional accountability remain with the Physician Advisor.

2. C - AI can efficiently organize and analyze clinical information, but the final medical necessity and level-of-care determination remains the responsibility of the Physician Advisor.

3. B - Physician Advisors must comply with organizational AI policies and HIPAA requirements and use organization-approved platforms when PHI is involved.

4. D - Specific prompts that define the task and desired output generally produce more useful responses.

5. C - AI can identify documentation opportunities, but the Physician Advisor must determine whether they are clinically relevant and whether clarification is appropriate.

6. B - The module describes AI as a "second set of eyes," not a second opinion.

7. B - Regulatory guidance, payer policies, and coverage criteria change. AI-generated references must be independently verified before use.

8. C - AI can analyze denial data to identify recurring documentation problems, payer trends, service-line vulnerabilities, and opportunities for improvement.

9. D - AI can prepare and organize talking points, but the Physician Advisor remains responsible for the Peer-to-Peer strategy, clinical reasoning, and professional opinion.

10. C - AI should function as a force multiplier, allowing Physician Advisors to spend less time organizing information and more time applying clinical judgment, communication, and leadership.

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