

## PAYMENT REIMBURSEMENT POLICY

**Title:** PRP 09 "Incident-To" Billing for Advanced Practice, Mid-Level, Limited Licensed Behavioral Health, and Therapy Providers

**Category:** UMHP\_PAYMENT REIMBURSEMENT (PR)

**Related Medical Policy:** None

**Effective Date:** 07/22/2024

### 1.0 Guidelines:

This policy applies to all network and non-network providers, including but not limited to the percent of charge contract providers. This policy does not guarantee benefits or solely determine reimbursement. Benefits are determined and/or limited by an individual member's benefit coverage document (COC, SPD, etc.). The Health Plan reserves the right to apply clinical edits to all medical claims through coding software and ensure the accuracy of claim submission according to industry billing standards. Clinical edits are derived from nationally recognized billing guidelines such as the Centers for Medicare and Medicaid Services (CMS), the National Correct Coding Initiative (NCCI), the American Medical Association (AMA), and specialty societies. The Health Plan may leverage the clinical rationale of CMS or other nationally sourced edits and apply this rationale to services that are not paid through CMS, but which are covered by the Health Plan to support covered benefits available through one of the Health Plan's products. Prior approval does not exempt adherence to the following billing requirements. The provider contract terms take precedence if there is a conflict between this policy and the provider contract.

### 2.0 Description:

The purpose of this reimbursement policy is to define reimbursable services and billing guidelines for Advanced Practice Providers (APP) and Mid-Level Practitioners (MLP), Limited Licensed Behavioral Health Providers (LLBHP), and Therapy Providers:

The following are considered APP/MLPs:

- Certified Clinical Nurse Specialist (CNS).
- Psychiatric and mental health (PMH) nurse clinical specialist.
- Nurse Practitioner (NP).
- Physician Assistant (PA).
- Certified Registered Nurse First Assistant (RNFA).
- Certified Nurse Midwife (CNM).
- Certified registered nurse anesthetist (CRNA).
- Limited Licensed Social Worker (LLMSW).
- Limited Licensed Psychologist (LLP).
- Limited Licensed Marriage and Family Therapist (LLMFT).
- Limited Licensed Professional Counselor (LLPC).
- Occupational Therapist (OT)
- Physical Therapist (PT)
- Speech- Language Therapist (ST)

### 3.0 Policy:

#### Incident to Billing

To qualify as "incident to," the following requirements must be met:

- The patient must be established in the practice.

- The services must be provided under the direct supervision of the billing physician or credentialed qualified non-physician practitioner.
- Services must be part of a patient's normal course of treatment, during which the supervising physician personally performs the initial service, establishes the plan of care, and remains actively involved during treatment. For therapy services (OT/PT/ST), see additional detail below.
- Subsequent services provided by the APP/MLP/LLBHP/OT/PT/ST must be related to the established plan of care.
- Services provided by the rendering practitioner that qualify for "incident to billing" as defined in this policy should be billed under the supervising physician's NPI.
- If there is a change in the plan of care, the service would no longer meet the requirement for "incident to" billing, the patient must be re-evaluated by the supervising physician, and services should be billed under the supervising physician's NPI number.
- A supervising physician does not have to be physically present in the patient's treatment room but must be readily available to render assistance if necessary.
- The rendering APP/MLP/LLBHP/OT/PT/ST billing under the supervising provider must be an employee of the practice.

### Supervision

#### Who can supervise?

The following clinicians are allowed to bill "incident to" services under their NPI as the supervising physician within the appropriate scope of their licensure:

- MD, DO
- Fully Licensed Psychologist
- Licensed Clinical Social Workers (LCSW)
- Occupational Therapist, Physical Therapist, Speech Therapist

#### Who can provide services as "incident to"?

Occupational, Physical, and Speech Therapy Services:

- UM Health Plan does credential therapy centers. Those centers credentialed as a group must bill their services under the group NPI. The services of athletic trainers, therapy aides, exercise physiologists, kinesiotherapists, students, or techs may provide services under the personal supervision and responsibility of a licensed professional within the group. Therapy assistants cannot bill "incident to" a physician or NPP in an office setting.

Qualifying "incident to" services

- An OT/PT/ST must be licensed to render the services.
- Therapists working in outpatient settings other than a credentialed therapy center may report OT/PT/ST services "incident to" when "incident to" billing requirements are met.
- Initial Visit
  - During the initial evaluation, the therapy plan of care should be documented fully to provide details about the part of the body being treated, including specific interventions, frequency, and duration of treatments.

- The physician must have initiated the care by personally performing the examination and personally identify the diagnosis, develop the plan of care, and complete order for therapy services.

#### Physician Assistants (PA) and Nurse Practitioners (NP):

UM Health Plan does credential NPs and PAs. Any NP/PA credentialed by UM Health Plan **must** bill their services under their own provider NPI. Non-credentialed NPs and PAs must meet "incident to" billing guidelines in an office and outpatient setting. The services rendered may be rendered by an NP/PA and considered reimbursable if the following requirements are met:

- Qualifying "incident to" services must be provided by a PA/NP whom the MD/DO directly supervises and who represents a direct financial expense to the MD/DO's practice. ("W-2," leased employee, or an independent contractor).
- For new patients, the MD/DO must personally review the history, examine the patient, establish a care plan, and make medical decisions regarding the patient's treatment and drug protocols.
- A PA must be licensed to render the services.
- An NP must have a master's degree in nursing.
- An NP must be a registered professional nurse authorized by the state in which their services are furnished to practice as a nurse practitioner in accordance with state law.
- An NP must be certified as a nurse practitioner by the American Nurses Credentialing Center (ANCC) or other recognized national certifying entities that have established standards for nurse practitioners.

#### Mental Health Providers:

- Mental health mid-level providers are required to meet "incident to" billing guidelines in an office and outpatient setting when billing under the supervision of a physician.
- The services may be rendered by a Limited Licensed Professional Counselor (LLPC), Limited Licensed Master Social Worker (LLMSW), Temporary Limited Licensed Psychologist (TLLP), and Limited Licensed Marriage & Family Therapist (LLMFT) and billed by the supervising Psychiatrist (MD, DO), Fully Licensed Psychologist, or Licensed Clinical Social Workers (LCSW) with the appropriate modifier to identify the level of the rendering provider.
- For new patients, the supervising physician must personally review the history, examine the patient, and make medical decisions regarding the patient's treatment and drug protocols.

## 4.0 Coding and Billing:

### Modifier(s)

Depending on the credentials of the practitioner, services provided, and billing scenario, the following modifiers may be applicable. Prior to claim submission, review coding for an applicable modifier(s). The appropriate modifier(s) must be reported to ensure proper reimbursement.

#### AS - Assistant Surgeon:

This modifier should be applied when an APP/MLP is billing for services where they acted as an assistant surgeon. Documentation should indicate that the non-physician assistant actively assisted the surgeon and participated in the actual performance of the procedure. The operative report must document the specific services the non-physician assistant surgeon

rendered. This should not be reported when the APP/MLP acted only as an "extra" set of hands or for observation training.

**AJ- Service Rendered by a Clinical Social Worker.**

Required on claims where the rendering provider is billing "incident to" a supervising behavioral health provider.

**HO-Service Rendered by a Masters' Level Clinician.**

Required on claims where the rendering provider is billing "incident to" a supervising behavioral health provider.

**SA- Incident-to services that are billed under the supervising physician's NPI number.**

This modifier should be applied when an APP/MLP/LLBHP/OT/PT/ST is billing "incident to" claims for non-surgical services.

**5.0 Reimbursement:**

Services performed by network APP/MLP/LLBHP/OT/PT/ST are reimbursed at the contracted proportion of the contracted fee schedule. Non-network APP/MLP/LLBHP OT/PT/ST are reimbursed at the standard non-network fee schedule.

The following services billed by APP/MLP/LLBHP under their individual NPIs are reimbursed at 100 percent of the physician fee schedule allowance when considered covered by the Health Plan.

CATEGORY	CPT/HCPCS
Category II Codes	0001F-9007F
Multianalyte Assay	0002M-0018M
Category III Codes	0042T-0783T
Laboratory Analyses	0001U-0386U
All HCPC Codes	A0021-V5364
Venipuncture Procedures	36415-36416
Delivery Services (by a CNM)	59400-59410, 59610-59614
Radiology Services	70010-79999
Pathology & Laboratory services	80047-89398
Immune Globulins	90281-90399
Vaccines/Immunization Administration for Vaccines/Toxoids	90460-90759
COVID -19 Vaccines/Toxoids	91300-91315

**6.0 Documentation Requirements:**

Signature:

The supervising physician is not required to co-sign the patient's record; however, the supervising physician must remain actively involved in the course of treatment, and documentation must support review and involvement in the oversight of the patient's care.

For example, the patient's record must indicate that the supervising physician-reviewed and agreed with the course of diagnosis or treatment of an injury or illness.

**7.0 Terms & Definitions:**

Certified Clinical Nurse Specialist (CNS): An advanced practice nurse with a graduate-level degree in nursing and competence in a specialized area of nursing, such as gerontology, pediatrics, or psychiatric nursing. The functions of the clinical nurse specialist include providing direct patient care, teaching patients and their families, guiding and planning care with other personnel, and conducting research. These skills are made directly available through the provision of nursing care to clients and indirectly available through guidance and planning of care with other nursing personnel. Clinical nurse specialists hold a master's degree in nursing, preferably with an emphasis in a specific clinical area of nursing.

Psychiatric and Mental Health (PMH) Nurse Specialist: Psychiatric mental health nursing is a specialty within nursing. Psychiatric mental health registered nurses work with individuals, families, groups, and communities, assessing their mental health needs. The PMH nurse specialist develops a nursing diagnosis and plan of care, implements the nursing process, and evaluates it for effectiveness.

Certified Nurse Practitioner (NP): A registered nurse with advanced education in nursing (a Master of Science in Nursing) and clinical experience in a specialized area of nursing practice.

Physician Assistant (PA): A Physician Assistant is a health care professional trained, certified, and licensed to perform history taking, physical examination, diagnosis, and treatment of commonly encountered medical problems, and certain technical skills under the supervision of a licensed physician, and who thereby extends the physician's capacity to provide medical care.

Certified Registered Nurse First Assistant (RNFA): A registered nurse who provides immediate, hands-on assistance to a surgeon during an operation. The RNFA may use surgical instruments to handle or incise tissues or organs, cauterize bleeding points, and suture wounds under the direction of the surgeon.

Certified Nurse-Midwife (CNM): A registered state-licensed nurse who, by virtue of added knowledge and skill gained through an organized program of study and clinical experience, is qualified to manage the care of women and/or newborns during the antepartum, intrapartum, and postpartum periods, and to provide expressly limited well-woman health care.

Certified Registered Nurse Anesthetist (CRNA): An advanced practice nurse who provides anesthetics to patients in practice settings for all types of surgeries and procedures. The CRNA has completed post-graduate education and passed a national certification examination.

Licensed Clinical Social Worker (LCSW): A provider with a master's degree in social work with full licensure who has completed all post-degree social work experience hours, supervised clinical hours, and Clinical ASWB exam. Able to independently provide clinical therapy or mental health services.

Limited Licensed Social Worker (LLMSW): A provider with a master's degree in social work who has not yet completed the two-year post-degree social work experience hours, supervised clinical hours, and Clinical ASWB Exam.

Limited Licensed Psychologist (LLP): Provider with a master's degree in psychology.

Limited Licensed Marriage and Family Therapist (LLMFT): Provider with a master's degree in marriage, family and child counseling who has not completed the supervised internship hours and exams to become a fully Licensed Therapist.

Limited Licensed Professional Counselor (LLPC): Provider with a master's degree in counseling who has not completed the clinical work experience and clinical supervision hours required to become a fully Licensed Professional Counselor (LPC).

Occupational Therapist: A licensed health care professional specializing in therapy based on engagement in meaningful activities of daily life (such as self-care skills, education, work, or social

interaction), especially to enable or encourage participation in such activities despite impairments or limitations in physical or mental functioning.

Physical Therapist: A licensed health care professional who provides therapy to preserve, enhance, or restore movement and physical function that is impaired or threatened by disease, injury, or disability.

Psychologist: Provider who holds a doctoral degree in clinical psychology or another specialty such as counseling or education. Trained to evaluate a person's mental health using clinical interviews, psychological evaluations, and testing. Ph.D. or PsyD.

Psychiatrists: Licensed medical doctors who have completed psychiatric training. They can diagnose mental health conditions, prescribe and monitor medications, and provide therapy. MD or DO.

Speech Therapist: A licensed health care professional who provides therapeutic treatment of impairments and disorders of speech, voice, language, communication, and swallowing.

## **8.0 Verification of Compliance:**

Claims are subject to audit, prepayment, and post-payment to validate compliance with the terms and conditions of this policy.

## **9.0 References, Citations, Resources & Associated Documents:**

Centers for Medicare and Medicaid Services, CMS Manual, and other CMS publications.

American Medical Association (AMA), Current Procedural Terminology (CPT), Healthcare Common Procedure Coding System (HCPCS), and associated publications.

Michigan Scope of Practice Policy.

Michigan Legislature Public Health Code Act 368 of 1978 Section 333.16215 & Section 333.17047.

## **10.0 Revision History:**

Original Effective Date: 06/01/2019

Next Revision Date: 07/22/2025

<b>Revision Date</b>	<b>Reason for Revision</b>
3/19	Policy created
6/20	Annual review; formatting updated, approved at 6/30/20 CCSC meeting
4/21	Annual review; added behavioral/mental health providers, approved by CCSC 4/19/21, updated verbiage on the Guidelines
2/22	Annual review, formatting changes M Glasgow made the following comments Changes made as discussed in CCSC 04/12 & 04/19. Annual review approved by CCSC.
3/23	Annual review
4/24	Annual review- Updated title for clarification