

“Incident to” Services

“Incident to” services means services or supplies that are furnished as an integral, although incidental, part of a supervising provider’s professional services. For physicians, “incident to” services include those provided by auxiliary personnel (e.g., medical assistants, licensed practical nurses, registered nurses, etc.), but exclude those provided by an advanced practice registered nurse (APRN) and physician assistant (PA). For APRNs and PAs, “incident to” services also include those provided by auxiliary personnel. For all “incident to” services, auxiliary personnel must only operate within the scope of practice of their license or certification.

Provider supervision must consist of either personal participation in the service or direct supervision coupled with review and approval of the service notes. Direct supervision is defined as the provider being present in the facility, though not necessarily present in the room where the service is being rendered, and immediately available to provide assistance and direction throughout the time the service is performed. For Office of Public Health clinics, providers must furnish general supervision, defined as under the supervising provider’s overall direction and control, but the provider’s presence is not required in the facility during the performance of the service.

When an APRN or PA provides all parts of the service independent of a supervising or collaborating physician’s involvement, even if a physician signs off on the service or is present in the facility, the service does not meet the requirements of “incident to” services. Instead, claims for such services must be submitted using the APRN or PA as the rendering provider.

It is inappropriate for a physician to submit claims for services provided by an APRN or PA with the physician listed as the rendering provider when the physician is only supervising, reviewing, or “signing off” on the APRN’s or PA’s records. Services billed in this manner are subject to post-payment review, recoupment, and additional sanctions as deemed appropriate by Louisiana Medicaid.

“Incident to” a physician’s professional services means that the services or supplies are furnished as an integral, although incidental, part of the physician’s personal professional services in the course of diagnosis or treatment of an injury or illness. “Incident to” services include those provided by aides or nurses, but exclude those provided by an advanced practice registered nurse (APRN) and physician assistant (PA). The physician, under whose provider number a service is provided, must perform or be involved with a portion of the service provided.

Physician involvement may take the form of personal participation in the service or may consist of direct personal supervision coupled with review and approval of the service notes at a future point in time. Direct personal supervision by the physician must be provided when the billed service is performed by auxiliary personnel. Direct personal supervision in an office means the physician must be present in the office suite and immediately available to provide assistance and direction throughout the time the service is performed.

When an APRN or PA provides all parts of the service independent of a supervising or collaborating physician’s involvement, even if a physician signs off on the service or is present in the office suite, the service does not meet the requirements of Medicaid “incident to” billing. Instead, the service must be

~~billed using the provider number of the APRN or PA as the rendering provider and must meet the specific coverage requirements of the APRN's or PA's scope of practice.~~

~~It would be inappropriate for a physician to submit claims for services provided by an APRN or PA with the physician listed as the rendering provider when the physician is only supervising, reviewing, and/or "signing off" on the APRN's or PA's records.~~