
CHAPTER 5: PROFESSIONAL SERVICES

SECTION 5.1: COVERED SERVICES**PAGE(S) 1**

“Incident To” Services

“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 ~~billed~~provided, must perform or be involved with a portion of the service ~~billed~~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.

Provider Alert

It ~~would be~~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, and/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.