

# Local Coverage Article: Incident To Clarification for OPPS and CAH Outpatient (A55215)

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## Contractor Information

Contractor Name	Contract Type	Contract Number	Jurisdiction	State(s)
<a href="#">Noridian Healthcare Solutions, LLC</a>	A and B MAC	01111 - MAC A	J - E	California - Entire State
<a href="#">Noridian Healthcare Solutions, LLC</a>	A and B MAC	01112 - MAC B	J - E	California - Northern
<a href="#">Noridian Healthcare Solutions, LLC</a>	A and B MAC	01182 - MAC B	J - E	California - Southern American Samoa
<a href="#">Noridian Healthcare Solutions, LLC</a>	A and B MAC	01211 - MAC A	J - E	Guam Hawaii Northern Mariana Islands American Samoa
<a href="#">Noridian Healthcare Solutions, LLC</a>	A and B MAC	01212 - MAC B	J - E	Guam Hawaii Northern Mariana Islands
<a href="#">Noridian Healthcare Solutions, LLC</a>	A and B MAC	01311 - MAC A	J - E	Nevada
<a href="#">Noridian Healthcare Solutions, LLC</a>	A and B MAC	01312 - MAC B	J - E	Nevada American Samoa California - Entire State
<a href="#">Noridian Healthcare Solutions, LLC</a>	A and B MAC	01911 - MAC A	J - E	Guam Hawaii Nevada Northern Mariana Islands

[Back to Top](#)

## Article Information

### General Information

<b>Article ID</b> A55215	<b>Original Article Effective Date</b> 10/01/2015
<b>Article Title</b> Incident To Clarification for OPPS and CAH Outpatient	<b>Revision Effective Date</b> N/A
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	<b>Retirement Date</b> N/A

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## Article Guidance

### Article Text:

In response to provider requests, Noridian Healthcare Solutions, LLC (Noridian) provides the following key points related to the "incident to" regulations in the outpatient hospital setting. Note: There is no "incident to" in the inpatient setting.

Medicare may reimburse the costs of services provided either:

1. delivered personally by eligible practitioners, e.g., MD, NP, PA; or
2. delivered by hospital personnel working "incident to" the eligible practitioner's care.

When hospital personnel provide services, the following payment requirements must be met. Services delivered incident to the services of an eligible practitioner must:

- o Be an integral although **incidental part** of a physician's/non-physician practitioner's (NPP's) professional service(s) and, hence, must always occur after an initial patient care service is provided by an eligible practitioner;
- o Be delivered in accordance with a **valid and signed order**, i.e., written by "a practitioner who is authorized to write orders by hospital policy and in accordance with state law..." 42 CFR§482.12(c);
- o Be delivered under the **supervision of a physician** who is an employee or has another contractual relationship with the hospital and is **immediately available** to provide assistance to the personnel delivering the service;
- "Immediately available" in the outpatient hospital setting means that the physician must be **available in the same time-frame as the personnel designated to manage cardiac arrests** (codes) in the hospital.
- The supervisor need not be in the same department as the ordering physician/NPP or in the same department in which the services are rendered but must be **on the physical premises** where and when the patient receives services.

The physician/NPP that provides the oversight may not bill for the services of hospital employees. Only the hospital may bill for the services of hospital employees.

All service providers must work in accordance with their skills, licensure, and/or other hospital and other Medicare requirements.

### Sources:

**Medicare Benefit Policy Manual (MBPM) Chapter 6 Section 20.5.1**

**Social Security Act (SSA) Section 1861(s)(2)(K)(i)**

**42 CFR§410.27**

**42 CFR§482.12(c)**

[Back to Top](#)

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# Coding Information

## **Bill Type Codes:**

Contractors may specify Bill Types to help providers identify those Bill Types typically used to report this service. Absence of a Bill Type does not guarantee that the article does not apply to that Bill Type. Complete absence of all Bill Types indicates that coverage is not influenced by Bill Type and the article should be assumed to apply equally to all claims.

N/A

## **Revenue Codes:**

Contractors may specify Revenue Codes to help providers identify those Revenue Codes typically used to report this service. In most instances Revenue Codes are purely advisory. Unless specified in the article, services reported under other Revenue Codes are equally subject to this coverage determination. Complete absence of all Revenue Codes indicates that coverage is not influenced by Revenue Code and the article should be assumed to apply equally to all Revenue Codes.

N/A

**CPT/HCPCS Codes** N/A

**ICD-10 Codes that are Covered** N/A

**ICD-10 Codes that are Not Covered** N/A

[Back to Top](#)

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# Revision History Information

N/A [Back to Top](#) **Related Local Coverage Document(s)** N/A

**Related National Coverage Document(s)** N/A

**Statutory Requirements URL(s)** N/A

**Rules and Regulations URL(s)** N/A

**CMS Manual Explanations URL(s)** N/A

**Other URL(s)** N/A

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# Keywords

- Incident-to-Services
- OPPS
- CAH
- Supervision
- Physician
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