



Payment Policy: Advanced Practice Provider (APP)

Point32Health companies

Applies to:

Commercial Products

- □ Tufts Health Plan Commercial products

Public Plans Products

- ☑ Tufts Health Direct A Massachusetts Qualified Health Plan (QHP) (a commercial product)
- ☑ Tufts Health Together MassHealth MCO Plan and Accountable Care Partnership Plans
- □ Tufts Health RITogether A Rhode Island Medicaid Plan
- ☑ Tufts Health One Care A dual-eligible product

Senior Products

- ☑ Tufts Health Plan Senior Care Options (SCO) (a dual-eligible product)
- ☑ Tufts Medicare Preferred HMO/PPO (Medicare Advantage products)

Policy

Point32Health reimburses professional services rendered by Advanced practice providers based on specific contract terms and state requirements. APP s include, but are not limited to, advanced practice registered nurses (APRN), nurse practitioners (NP), certified nurse-midwives (CNM), certified professional midwives (CPM), certified registered nurse anesthetists (CRNA), clinical nurse specialists (CNS), and physician assistants (PA).

State law governs the specific services that may be performed by advanced practice providers. It is the responsibility of the APP, or the supervising physician when applicable, to assure full compliance with state law in the state where the services are provided.

Prerequisites

Applicable Point32Health referral, notification, and authorization policies may apply. Refer to the appropriate sections within the <u>Provider Manuals</u> for more information.

General Benefit Information

Services are pursuant to the member's benefit plan documents and are subject to applicable member out-of-pocket cost (e.g., copayment, coinsurance, deductible). Member eligibility and benefit specifics should be verified prior to initiating services.

Use of non-contracted labs may have the unintended consequence of subjecting the member to unnecessary services not ordered by the treating provider or other unreasonable financial exposure. In such circumstances, Point32Health may hold the ordering provider accountable for any inappropriate behavior on the part of the nonparticipating lab that has been selected.

Point32Health Reimburses

- Assistant surgeon services when performed by a physician, PA, or NP, consistent with CMS' determination of approved procedure codes payable to an assistant surgeon.
- APP claims are reimbursed at a rate equal to 85% of the supervising physicians reimbursement rate.
- Services provided by participating APPs, based on contract terms and appropriate fee schedules.

Point32Health Does Not Reimburse

 A surgical first assistant or registered nurse first assistant (RNFA) as an assistant at surgery, unless required by state mandate.

Provider Billing Guidelines and Documentation

Providers are reimbursed according to the applicable contracted rates and fee schedules.

Coding

Modifier	Description
AS	Physician billing for non-physician practitioner for assistant at surgery- Reimbursed at 14% of the applicable fee schedule/ allowable rate
SA	Physician billing for non-physician practitioner- Reimbursed at 85 % of the supervising physicians reimbursement rate

Note: Refer to the Anesthesia payment policies for billing information specific to CRNAs.

Contracted APPs

- When Point32Health contracts directly with the APP, submit claims using the name and NPI of the APP.
- Do not append modifier SA.

Non-Contracted APPs

- When Point32Health does not contract directly with the APP, submit claims using the supervising physician's name and NPI.
- Modifier SA is required.

Commercial Products (Fully Insured)

Effective for dates of service beginning Jan . 1, 2025, APRN contracted in New Hampshire who operate as an independent practice will be reimbursed at 100% of the physician fee schedule.

Senior Products

"Incident To" Services

For services that qualify as "incident to", the services must be part of the member's normal course of treatment, during which a contracting collaborating provider personally performed an initial service and remains actively involved in the member's course of treatment. The collaborating provider does not need to be present in the member's treatment room while these services are rendered. However, the collaborating provider must provide direct supervision and be present in the office suite at the time services are rendered to provide assistance, if necessary. The member's medical record should document the essential requirements for "incident to" services.

APPs should submit the collaborating/supervising provider's NPI or provider ID in box 24j of the professional claim form.

Related Policies and Resources

Payment Policies

Harvard Pilgrim Health Care

- Anesthesia
- Evaluation and Management
- Obstetrics/Gynecology
- Surgery

Tufts Health Plan

- Anesthesia
- Evaluation and Management
- Obstetrics/Gynecology
- Surgery Professional

Other Resources

Provider Manuals

Publication History

04/01/2025: Policy moved to new template; includes all lines of business; added reimbursement effective for DOS beginning

Jan 1, 2025 for NH APRNs; updated related policies and resources

Background and Disclaimer Information

This policy applies to the products of Harvard Pilgrim Health Care and Tufts Health Plan and their affiliates, as identified in the check boxes on the first page for services performed by contracted providers.

Payment is based on member benefits and eligibility on the date of service, medical necessity review, where applicable, and the provider's network participation agreement with the Plan. As every claim is unique, this policy is neither a guarantee of payment, nor a final indication of how specific claim(s) will be adjudicated. Claims payment is subject to member eligibility and benefits on the date of service, coordination of benefits, referral/authorization, and utilization management requirements (when applicable), adherence to Plan policies and procedures, and claims editing logic. An authorization is not a guarantee of payment.

Point32Health reserves the right to amend a payment policy at its discretion. CPT and HCPCS codes are updated as applicable; please adhere to the most recent CPT and HCPCS coding guidelines.

We reserve the right to conduct audits on any provider and/or facility to ensure accuracy and compliance with the guidelines stated in this payment policy. If such an audit determines that a provider/facility did not comply with this payment policy, Harvard Pilgrim Health Care and Tufts Health Plan will expect the provider/facility to refund all payments related to noncompliance.