

		Reimbursement Policy
Subject: Nurse Practitioner and Physician Assistant Services		
Effective Date: 04/24/20	Committee Approval Obtained: 04/24/20	Section: Administration
*****The most current version of our reimbursement policies can be found on our provider website. If you are using a printed version of this policy, please verify the information by going to https://mediproviders.anthem.com/nv .*****		
<p>These policies serve as a guide to assist you in accurate claim submissions and to outline the basis for reimbursement by Anthem Blue Cross and Blue Shield Healthcare Solutions (Anthem). The determination that a service, procedure, item, etc. is covered under a member's benefit plan is not a determination that you will be reimbursed. Services must meet authorization and medical necessity guidelines appropriate to the procedure and diagnosis as well as to the member's state of residence. You must follow proper billing and submission guidelines. You are required to use industry standard, compliant codes on all claim submissions. Services should be billed with CPT® codes, HCPCS codes and/or revenue codes. The codes denote the services and/or procedures performed. The billed code(s) are required to be fully supported in the medical record and/or office notes. Unless otherwise noted within the policy, our policies apply to both participating and nonparticipating providers and facilities.</p> <p>If appropriate coding/billing guidelines or current reimbursement policies are not followed, Anthem may:</p> <ul style="list-style-type: none"> • Reject or deny the claim. • Recover and/or recoup claim payment. <p>Anthem reimbursement policies are developed based on nationally accepted industry standards and coding principles. These policies may be superseded by mandates in provider, state, federal or CMS contracts and/or requirements. System logic or setup may prevent the loading of policies into the claims platforms in the same manner as described; however, Anthem strives to minimize these variations.</p> <p>Anthem reserves the right to review and revise our policies periodically when necessary. When there is an update, we will publish the most current policy to this site.</p>		
Policy	<p>Anthem allows reimbursement for services provided by Nurse Practitioner (NP) and Physician Assistant (PA) providers. Unless provider, state, federal or CMS contracts and/or requirements indicate otherwise, reimbursement is based upon all of the following:</p> <ul style="list-style-type: none"> • Service is considered a physician's service • Service is within the scope of practice • A payment consistent with the NP and PA Fee Schedule rates <p>Services furnished by the NP or PA should be submitted with their own NPI.</p>	

<https://mediproviders.anthem.com/nv>

History	<ul style="list-style-type: none"> • Initial policy approved and effective 04/24/20
References and Research Materials	<p>This policy has been developed through consideration of the following:</p> <ul style="list-style-type: none"> • CMS • State Medicaid • State contracts • Federation of State Medical Boards of the United States, Inc.
Definitions	<ul style="list-style-type: none"> • Modifier SA: Nurse Practitioner rendering service in collaboration with a physician • General Reimbursement Policy Definitions
Related Policies	<ul style="list-style-type: none"> • Assistant at Surgery (Modifier 80/81/82/AS) • Modifier Usage • Scope of Practice
Related Materials	<ul style="list-style-type: none"> • None