

Subject:	Nurse Practitioners and Physician Assistants		
Policy Number:	PO-RE-097v1		
Effective Date:	04/1/2019	Last Approval Date:	04/1/2019

I. Policy Description

Effective April 1, 2019, Healthfirst will implement changes to its reimbursement policy for nurse practitioners (NPs) and physician assistants (PAs) to better align with existing Centers for Medicare & Medicaid Services (CMS) reimbursement policies regarding these types of physician extenders. The following guidelines outline the new reimbursement rates and exceptions for covered services provided by NPs and PAs to Healthfirst members.

The information below applies to the following lines of business.

- Child Health Plus
- Small/Individual Group (Commercial Plan)
- Essential Plan
- Medicaid Managed Care
- Medicare PPO
- Integrated Benefits Dual Connection Plan
- Health & Recovery Plan (HARP)
- Medicare Advantage
- Medicaid Advantage Plus/MAP (Complete Care)
- Qualified Health Plan (QHP)
- Managed Long Term Care Partial Capitation Plan (MLTCP - Senior Health Partners)

Policy Scope

The change in reimbursement policy is intended to align with CMS guidelines more closely and to ensure fair and appropriate reimbursement for services provided by NPs and PAs. This change reflects the evolving landscape of healthcare delivery and the valuable contributions of NPs and PAs to the delivery of care.

Reimbursement Guidelines

Nurse Practitioners (NPs):



Healthfirst will reimburse nurse practitioners at 85% of the physician's allowed amount for covered services. The exception will be Part B drugs (vaccines, flu shots, antibiotics, etc.), which will be reimbursed at 100% of the physician's allowed amount. For assistant-at-surgery services billed with modifier AS, nurse practitioners will be reimbursed 16% of their allowed amount.

Physician Assistants (PAs):

Healthfirst will reimburse physician assistants at 85% of the physician's allowed amount for covered services. The exception will be Part B drugs (vaccines, flu shots, antibiotics, etc.), which will be reimbursed at 100% of the physician's allowed amount. For assistant-at-surgery services billed with modifier AS, physician assistants will be reimbursed 16% of their allowed amount.

II. Applicable Codes

Code	Description	Comment
N/A	N/A	

III. Definitions

Term	Meaning
Physician Assistant (PA)	A person certified to provide basic medical services, usually under the supervision of a licensed physician. Abbreviation is PA.
Nurse Practitioner (NP)	A registered nurse who is qualified through advanced training to assume some of the duties and responsibilities formerly assumed only by a physician. Abbreviation is NP.

IV. Related Policies

Policy Number	Policy Description
N/A	N/A

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Procedure codes appearing in Reimbursement Policy documents are included only as a general reference tool for each policy. They may not be all-inclusive.

V. Reference Materials

VI. Revision History

Revision Date	Summary of Changes	

Disclaimer

Healthfirst's claim edits follow national industry standards aligned with CMS standards that include, but are not limited to, the National Correct Coding Initiative (NCCI), the National and Local Coverage Determination (NCD/LCD) policies, appropriate modifier usage, global surgery and multiple procedure reduction rules, medically unlikely edits, duplicates, etc. In addition, Healthfirst's coding edits incorporate industry-accepted AMA and CMS CPT, HCPCS and ICD-10 coding principles, National Uniform Billing Editor's revenue coding guidelines, CPT Assistant guidelines, New York State-specific coding, billing, and payment policies, as well as national physician specialty academy guidelines (coding and clinical). Failure to follow proper coding, billing, and/or reimbursement policy guidelines could result in the denial and/or recoupment of the claim payment.

This policy is intended to serve as a resource for providers to use in understanding reimbursement guidelines for professional and institutional claims. This information is accurate and current as of the date of publication. It provides information from industry sources about proper coding practice. However, this document does not represent or guarantee that Healthfirst will cover and/or pay for services outlined. Reimbursement decisions are based on the terms of the applicable evidence of coverage, state and federal requirements or mandates, and the provider's participation agreement. This includes the determination of any amounts that Healthfirst or the member owes the provider.