

Medicare-Who May Supervise Incident to Services

October 04, 2018

This is a reminder that the following practitioners may perform and supervise incident to services. **Physician means physician or other practitioner (physician, physician assistant, nurse practitioner, clinical nurse specialist, nurse midwife and clinical psychologist) authorized by the Social Security Act to receive payment for services incident to his or her own services.**

Per the [Centers for Medicare & Medicaid Services Internet-Only Manual Publication 100-02, Medicare Benefit Policy Manual, Chapter 15 \(1 MB\) Section 60.1, Services and Supplies Furnished "Incident To" Physician's/ NPP's Professional Service](#)

A - Noninstitutional Setting

For purposes of this section a noninstitutional setting means all settings other case the incident to requirements would apply.

Medicare pays for services and supplies (including drug and biologicals which are not usually self-administered) that are furnished incident to a physician's or other practitioner's services, are commonly included in the physician's or practitioner's bills, and for which payment is not made under a separate benefit category listed in §1861(s) of the Act. A/B MACs (A) and (B) must not apply incident to requirements to services having their own benefit category.

Rather, these services should meet the requirements of their own benefit category. For example, diagnostic tests are covered under §1861(s)(3) of the Act and are subject to their own coverage requirements. Depending on the particular tests, the supervision requirement for diagnostic tests or other services may be more or less stringent than supervision requirements for services and supplies furnished incident to physician's or other practitioner's services.

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Diagnostic tests need not also meet the incident to requirement in this section. Likewise, pneumococcal, influenza, and hepatitis B vaccines are covered under §1861(s)(10) of the Act and need not also meet incident to requirements. (Physician assistants, nurse practitioners, clinical nurse specialists, certified nurse midwives, clinical psychologists, clinical social workers, physical therapists and occupational therapists all have their own benefit categories and may provide services without direct physician supervision and bill directly for these services.

When their services are provided as auxiliary personnel (see under direct physician supervision, they may be covered as incident to services, in which case the incident to requirements would apply.

For purposes of this section, physician means physician or other practitioner (physician, physician assistant, nurse practitioner, clinical nurse specialist, nurse midwife, and clinical psychologist) authorized by the Act to receive payment for services incident to his or her own services.

To be covered incident to the services of a physician or other practitioner, services and supplies must be:

- ⇒ An integral, although incidental, part of the physician's professional service (see §60.1);
- ⇒ Commonly rendered without charge or included in the physician's bill (see §60.1A);
- ⇒ Of a type that are commonly furnished in physician's offices or clinics (see §60.1A);
- ⇒ Furnished by the physician or by auxiliary personnel under the physician's direct supervision (see §60.1B)