

Part B Insider (Multispecialty) Coding Alert

Reader Question: This MAC Won't Allow NP to Bill X-Ray Technical Component

Question: We submitted a claim to Medicare for an x-ray's global fee under our nurse practitioner's provider number. Our MAC responded with an EOB that said as of Jan. 1, 2013, our nurse practitioners can only bill for the professional component (with modifier 26 appended). Do we write off the technical component of these x-rays?

New York Subscriber

Answer: Unfortunately, the news you received from your MAC is accurate for your region, but other Medicare contractors may still allow NPs to bill the global fee for x-rays.

Earlier this year, National Government Services issued an announcement saying that it would only pay the professional component of the NP's x-ray work. The news read as follows:

"Effective January 1, 2013, National Government Services has restored an edit in our claims processing system to not allow payment for global radiologic procedures or the technical component of radiologic procedures when performed by a non-physician practitioner. The basis for limiting non-physician practitioners such as physician's assistants and nurse practitioners from performing the technical component of x-ray procedures is that this service falls outside the scope of their license. National Government Services will allow non-physician practitioners to perform the professional component x-rays, therefore the global codes as well as the technical codes will be denied."

Therefore, your non-physician practitioner will not be able to report the technical component or global x-ray fee. It's possible that your MAC may allow you to report the technical component under the supervising physician's NPI if the service meets the regulations to report the x-ray as "incident to," but that would be up to your carrier and your state licensing requirements.