

Eli's Rehab Report

Reader Question: MD Must See Patient First for Incident-To

Question: Our nurse practitioner (NP) often sees patients and, if the physiatrist is in the office, I bill the NP's services incident-to. The NP recently started seeing new patients, and I didn't think we could bill those services incident-to, but the physician now briefly sees the patient after the NP and reviews her notes. Should we bill the services incident-to because the physician sees the patient after the NP does?

Kentucky Subscriber

Answer: Because the HHS Office of Inspector General (OIG) continues to monitor claims for incident-to services, always follow the Medicare Carriers Manual (MCM) guidelines for billing incident-to services. Section 2050.2 of the MCM states, "there must have been a direct, personal, professional service furnished by the physician to initiate the course of treatment of which the service being performed by the nonphysician practitioner is an incidental part."

Most state carriers and coding consultants interpret this to mean that the physician must initiate the patient's treatment before any nonphysician practitioners can bill incident-to. So unless your carrier specifies in writing that you can bill this way, your NP should not report her initial E/M visits as incident-to.