

Highmark Reimbursement Policy Bulletin



HISTORY VERSION

Bulletin Number: RP-068
Subject: Mid-Level Practitioners and Advanced Practice Providers
Effective Date: September 25, 2023 **End Date:**
Issue Date: August 16, 2024 **Revised Date:** August 2024
Date Reviewed: July 2024
Source: Reimbursement Policy

Applicable Commercial Market	PA	<input checked="" type="checkbox"/>	WV	<input type="checkbox"/>	DE	<input checked="" type="checkbox"/>	NY	<input checked="" type="checkbox"/>
Applicable Medicare Advantage Market	PA	<input checked="" type="checkbox"/>	WV	<input checked="" type="checkbox"/>	DE	<input checked="" type="checkbox"/>	NY	<input checked="" type="checkbox"/>
Applicable Claim Type	UB	<input type="checkbox"/>	1500	<input checked="" type="checkbox"/>				

➔ A checked box indicates the policy is applicable to that market either entirely, or partially, as indicated within the policy.

Reimbursement Policy designation of Professional or Facility application is based on how the provider is contracted with the Plan. This Policy supersedes direction provided in Bulletins prior to the effective date of this policy.

PURPOSE:

The Plan has based this reimbursement policy on the guidelines established by the Centers for Medicare and Medicaid Services (CMS) regarding the reimbursement of “Mid-level”, non-physician providers; including, but not limited to, Physician Assistants (PA), Nurse Practitioners (NP) and Clinical Nurse Specialists (CNS). Mid-level practitioners also called non-physician practitioners, Advanced Practice Providers, or commonly mid-levels are health care providers who assess, diagnose, and treat patients but do not have the education of or certification as a physician. This policy will utilize the term mid-level practitioner.

REIMBURSEMENT GUIDELINES:

Reductions apply to services rendered by an enumerated and/or credentialed licensed Mid-level practitioner for services in which care delivery is determined by the practitioner’s knowledge, skills, and abilities. Examples include evaluation and management (E&M) services, procedures performed by the Mid-level practitioner, psychotherapy, etc. Commodity services such as vaccines, drugs, labs, and other diagnostic services will not be subject to the reductions when submitted on the same claim as an applicable service. Mid-level practitioners must be listed as the rendering provider on all claims where the Mid-level practitioner is performing the service, even if the Mid-level practitioner is under the supervision of a physician. The following services billed by a Mid-level practitioner will be reimbursed at 100 percent of the fee schedule allowance when covered:

- ◆ Laboratory services
- ◆ After-hours services
- ◆ Supplies
- ◆ Injected or infused drugs
- ◆ Diagnostic tests

Additionally, Mid-level practitioners with specific rates in their contract and providers contracted through a third-party vendor will supersede and not apply to this policy direction. Services rendered by Certified Registered Nurse Anesthetists (CRNA) also do not apply to this policy. Payment for assistant-at-surgery shall follow the same rules for eligible procedures as for physicians following the direction in RP-001: Assistant at Surgery Services.

The Plan will consider medical services provided by a Mid-level practitioner for reimbursement under the following criteria:

- The service(s) provided is/are considered a physicians' service and is a covered service under the member's benefit plan.
 - Services that traditionally have been reserved to physicians, such as physical examinations, minor surgery, setting casts for simple fractures, interpreting x-rays and other activities that involve an independent evaluation or treatment of the patient's condition.
- The service(s) provided is/are within the Mid-level practitioner's scope of practice.
- Claims include assigned individual Mid-level practitioner NPI Number.

Note: If the Mid-level practitioner has not received confirmation from the Plan that enumeration within the Plan's system has been completed, the claim will be rejected.

The reimbursement reductions identified in the grids below apply to services rendered or billed by enumerated and/or credentialed Mid-level practitioners on professional claims.

Certain Mid-level practitioners may not be listed in the grids below because they are aggregated into the attributed identifiers that do appear. Some of these are known as; Advanced Practice Nurse (APN), Certified Nurse Practitioner (CNP), Certified Registered Nurse (CRN), Marriage and Family Therapist (MFT), Professional Counselor of Mental Health, Social Worker, Licensed Graduate Social Worker (LGSW), Licensed Independent Clinical Social Worker (LICSW), and Certified Nurse Midwife.

Note: To confirm your specialty, please access the Provider Data Maintenance application via Availity.

Note: Mid-level practitioners are not Auxiliary Personnel. See the Provider Manual on the Provider Resource Center for more information on Auxiliary Personnel.

PENNSYLVANIA

Practitioner Reimbursement for Pennsylvania Commercial Products
85% of fee schedule
<ul style="list-style-type: none"> ▪ Clinical Nurse Specialist (CNS) – Mental Health ▪ Clinical Nurse Specialist (CNS) ▪ Certified Registered Nurse Practitioner (CRNP) ▪ Certified Registered Nurse Practitioner (CRNP) PCP ▪ Certified Registered Nurse Practitioner (CRNP) - Mental Health ▪ Physician Assistants (where allowed by law) ▪ Physician Assistant PCP

75% of fee schedule
<ul style="list-style-type: none"> ▪ Licensed Associate Marriage and Family Therapist (LAMFT) ▪ Licensed Associate Professional Counselor (LAPC) ▪ Licensed Clinical Social Workers (LCSW) ▪ Licensed Social Worker (LSW) ▪ Licensed Professional Counselor (LPC) ▪ Licensed Marriage and Family Therapist (LMFT)

Practitioner Reimbursement for Pennsylvania Medicare Advantage Products
85% of fee schedule
<ul style="list-style-type: none"> ▪ Clinical Nurse Specialist (CNS) – Mental Health ▪ Clinical Nurse Specialist (CNS) ▪ Certified Registered Nurse Practitioner (CRNP) PCP ▪ Certified Registered Nurse Practitioner (CRNP) ▪ Certified Registered Nurse Practitioner - Mental Health ▪ Physician Assistants (where allowed by law) ▪ Physician Assistant PCP
75% of fee schedule
<ul style="list-style-type: none"> ▪ Licensed Professional Counselor (LPC) ▪ Licensed Clinical Social Workers (LCSW) ▪ Licensed Marriage and Family Therapist (LMFT)

Note: The Plan follows standard CMS Mid-level practitioners / APPs fee schedule reductions for Medicare recognized practitioners when processing Medicare Advantage Claims.

DELAWARE

Practitioner Reimbursement for Delaware Commercial Products
85% of fee schedule
<ul style="list-style-type: none"> ▪ Clinical Nurse Specialist (CNS) – Mental Health ▪ Clinical Nurse Specialist (CNS) ▪ Certified Registered Nurse Practitioner (CRNP) ▪ Certified Registered Nurse Practitioner (CRNP) PCP ▪ Certified Registered Nurse Practitioner (CRNP) - Mental Health ▪ Physician Assistants (where allowed by law) ▪ Physician Assistant PCP
75% of fee schedule
<ul style="list-style-type: none"> ▪ Licensed Associate Marriage and Family Therapist (LAMFT) ▪ Licensed Associate Professional Counselor (LAPC) ▪ Licensed Clinical Social Workers (LCSW) ▪ Licensed Social Worker (LSW) ▪ Licensed Professional Counselor (LPC) ▪ Licensed Marriage and Family Therapist (LMFT)

Practitioner Reimbursement for Delaware Medicare Advantage Products
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85% of fee schedule

- | |
|---|
| <ul style="list-style-type: none"> ▪ Clinical Nurse Specialist (CNS) – Mental Health ▪ Clinical Nurse Specialist (CNS) ▪ Certified Registered Nurse Practitioner (CRNP) PCP ▪ Certified Registered Nurse Practitioner (CRNP) ▪ Certified Registered Nurse Practitioner - Mental Health ▪ Physician Assistants (where allowed by law) ▪ Physician Assistant PCP |
|---|

75% of fee schedule

- | |
|---|
| <ul style="list-style-type: none"> ▪ Licensed Professional Counselor (LPC) ▪ Licensed Clinical Social Workers (LCSW) ▪ Licensed Marriage and Family Therapist (LMFT) |
|---|

Note: The Plan follows standard CMS Mid-level practitioners / APPs fee schedule reductions for Medicare recognized practitioners when processing Medicare Advantage Claims.

NEW YORK

Practitioner Reimbursement for New York Commercial Products
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85% of fee schedule

- | |
|---|
| <ul style="list-style-type: none"> ▪ Clinical Nurse Specialist (CNS) ▪ Certified Registered Nurse Practitioner (CRNP) PCP ▪ Certified Registered Nurse Practitioner (CRNP) ▪ Certified Registered Nurse Practitioner (CRNP) - Mental Health ▪ Midwifery ▪ Physician Assistants (where allowed by law) ▪ Physician Assistant PCP ▪ Registered Nurse First Assistant (RNFA) |
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Practitioner Reimbursement for New York Medicare Advantage Products
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85% of fee schedule

- | |
|--|
| <ul style="list-style-type: none"> ▪ Clinical Nurse Specialist (CNS) ▪ Certified Registered Nurse Practitioner (CRNP) PCP ▪ Certified Registered Nurse Practitioner (CRNP) ▪ Certified Registered Nurse Practitioner (CRNP) - Mental Health ▪ Midwifery ▪ Physician Assistants (where allowed by law) ▪ Physician Assistant PCP |
|--|

Note: The Plan follows standard CMS Mid-level practitioners / APPs fee schedule reductions for Medicare recognized practitioners when processing Medicare Advantage Claims.

Note: For **New York region only**, applicable to all products, mid-level reductions will apply to **provider unique specialty pricing fee schedules** unless specified otherwise in the provider's contract.

WEST VIRGINIA

Practitioner Reimbursement for West Virginia Medicare Advantage Products
85% of fee schedule
<ul style="list-style-type: none"> ▪ Clinical Nurse Specialist (CNS) – Mental Health ▪ Clinical Nurse Specialist (CNS) ▪ Certified Registered Nurse Practitioner (CRNP) PCP ▪ Certified Registered Nurse Practitioner (CRNP) ▪ Certified Registered Nurse Practitioner - Mental Health ▪ Physician Assistants (where allowed by law) ▪ Physician Assistant PCP
75% of fee schedule
<ul style="list-style-type: none"> ▪ Licensed Professional Counselor (LPC) ▪ Licensed Clinical Social Workers (LCSW) ▪ Licensed Marriage and Family Therapist (LMFT)

Note: The Plan follows standard CMS Mid-level practitioners / APPs fee schedule reductions for Medicare recognized practitioners when processing Medicare Advantage Claims.

DEFINITIONS:

Term or Acronym	Definition
APP	Advanced Practice Provider
APN	Advanced Practice Nurse
CMS	Centers for Medicare and Medicaid Services
CNM	Certified Nurse Midwife
CNP	Certified Nurse Practitioner
CNS	Clinical Nurse Specialist
CRNP	Certified Registered Nurse Practitioner
CRN	Certified Registered Nurse
Credentialed	Successfully completing the process if having education, training, and professional experience verified to meet the internal requirements of the Plan for serving as an in-network provider. Credentialed providers are included in the provider directory.
Enumerated	The assignment of a specific identifying number, a Blue Sheild ID, to a provider for submission on claims
LAMFT	Licensed Associate Marriage and Family Counselor
LAPC	Licensed Associate Professional Counselor
LCSW	Licensed Clinical Social Worker
LSW	Licensed Social Worker
LMFT	Licensed Marriage and Family Therapist
LPC	Licensed Professional Counselor
MFT	Marriage and Family Therapist
NM	Nurse Midwife
PA	Physician Assistant

PCP	Primary Care Physician
RNFA	Registered Nurse First Assistant

RELATED POLICIES:

Refer to the following Medical Policies for additional information:

- Commercial Policy Z-27: Eligible Providers

Refer to the following Reimbursement Policies for additional information:

- RP-001: Assistant Surgery
- RP-010: Incident-To Services
- RP-035: Correct Coding Guidelines
- RP-041: Services Not Separately Reimbursed
- RP-044: Medication Therapy Management Services

INFORMATION FOR CREDENTIALING AND ENUMERATION PROCESS AND REQUIREMENTS:

For credentialing process and requirements, please refer to the Provider Resource Center for your location. Choose the Provider Manual, Chapter 3 for details.

Failure of the Mid-Level practitioner to be enumerated in the Plan's system will result in:

1. Potential post-payment investigation and recoupment of claim reimbursement for noncompliance with this policy.
2. Potential rejection of the claim. The claim may be resubmitted for reimbursement consideration once the Mid-Level rendering provider is credentialed / enumerated in the Plan's system.

ADDITIONAL BILLING INFORMATION, REFERENCES AND GUIDELINES:

Provider Billing Manual; Chapter 6, Unit 4: Reporting Mid-level Provider Services for Medicare Advantage (Pennsylvania and West Virginia Only)

Pennsylvania Legislature; (2023-2024) House Bill 1564

Limitations on Pennsylvania associate marriage and family therapist license: A licensed associate marriage and family therapist shall work under the supervision of a licensed marriage and family therapist or a related licensed professional as approved by the board who directs the activities of the licensed associate marriage and family therapist. A licensed associate marriage and family therapist shall not practice in a private setting without the direction of a supervisor.

Limitations on Pennsylvania associate professional counselor license: A licensed associate professional counselor shall work under the supervision of a licensed professional counselor or a related licensed professional approved by the board who directs the activities of the licensed associate professional counselor. A licensed associate professional counselor shall not practice in a private setting without the direction of a supervisor.

REFERENCES:

- Centers for Medicare and Medicaid Services; MLN Matters SE0441, issued August 23, 2016.
- Medicare Physicians Fee Schedule Final Rule Calendar Year (CY) 2021, 2023
- Pennsylvania Legislature; (2023-2024) House Bill 1564
[Bill Information - House Bill 1564; Regular Session 2023-2024 - PA General Assembly \(state.pa.us\)](#)
- West Virginia Legislature; (2020) Senate Bill 787
https://www.wvlegislature.gov/Bill_Status/bills_history.cfm?INPUT=787&year=2020&sessiontype=RS
- New York Insurance Law Section 4303
<https://www.nysenate.gov/legislation/laws/ISC/4303>

POLICY UPDATE HISTORY INFORMATION:

9 / 2023	Implementation
6 / 2024	Updated to include regional specific grids and added specialties
8 / 2024	Changed LCSW reimbursement to 75%. Added House Bill 1564 limitations on associate licenses.

Highmark Reimbursement Policy Bulletin



HISTORY VERSION

Bulletin Number: RP-068
Subject: Mid-Level Practitioners and Advanced Practice Providers
Effective Date: September 25, 2023 **End Date:**
Issue Date: June 1, 2024 **Revised Date:** June 2024
Date Reviewed: April 2024
Source: Reimbursement Policy

Applicable Commercial Market	PA	<input checked="" type="checkbox"/>	WV	<input type="checkbox"/>	DE	<input checked="" type="checkbox"/>	NY	<input checked="" type="checkbox"/>
Applicable Medicare Advantage Market	PA	<input checked="" type="checkbox"/>	WV	<input checked="" type="checkbox"/>	DE	<input checked="" type="checkbox"/>	NY	<input checked="" type="checkbox"/>
Applicable Claim Type	UB	<input type="checkbox"/>	1500	<input checked="" type="checkbox"/>				

➔ A checked box indicates the policy is applicable to that market either entirely, or partially, as indicated within the policy.

Reimbursement Policy designation of Professional or Facility application is based on how the provider is contracted with the Plan. This Policy supersedes direction provided in Bulletins prior to the effective date of this policy.

PURPOSE:

The Plan has based this reimbursement policy on the guidelines established by the Centers for Medicare and Medicaid Services (CMS) regarding the reimbursement of “Mid-level”, non-physician providers; including, but not limited to, Physician Assistants (PA), Nurse Practitioners (NP) and Clinical Nurse Specialists (CNS). Mid-level practitioners also called non-physician practitioners, Advanced Practice Providers, or commonly mid-levels are health care providers who assess, diagnose, and treat patients but do not have the education of or certification as a physician. This policy will utilize the term mid-level practitioner.

REIMBURSEMENT GUIDELINES:

Reductions apply to services rendered by an enumerated and/or credentialed licensed Mid-level practitioner for services in which care delivery is determined by the practitioner’s knowledge, skills, and abilities. Examples include evaluation and management (E&M) services, procedures performed by the Mid-level practitioner, psychotherapy, etc. Commodity services such as vaccines, drugs, labs, and other diagnostic services will not be subject to the reductions when submitted on the same claim as an applicable service. Mid-level practitioners must be listed as the rendering provider on all claims where the Mid-level practitioner is performing the service, even if the Mid-level practitioner is under the supervision of a physician. The following services billed by a Mid-level practitioner will be reimbursed at 100 percent of the fee schedule allowance when covered:

- ◆ Laboratory services
- ◆ After-hours services
- ◆ Supplies
- ◆ Injected or infused drugs
- ◆ Diagnostic tests

Additionally, Mid-level practitioners with specific rates in their contract and providers contracted through a third-party vendor will supersede and not apply to this policy direction. Services rendered by Certified Registered Nurse Anesthetists (CRNA) also do not apply to this policy. Payment for assistant-at-surgery shall follow the same rules for eligible procedures as for physicians following the direction in RP-001: Assistant at Surgery Services.

The Plan will consider medical services provided by a Mid-level practitioner for reimbursement under the following criteria:

- The service(s) provided is/are considered a physicians' service and is a covered service under the member's benefit plan.
 - Services that traditionally have been reserved to physicians, such as physical examinations, minor surgery, setting casts for simple fractures, interpreting x-rays and other activities that involve an independent evaluation or treatment of the patient's condition.
- The service(s) provided is/are within the Mid-level practitioner's scope of practice.
- Claims include assigned individual Mid-level practitioner NPI Number.

Note: If the Mid-level practitioner has not received confirmation from the Plan that enumeration within the Plan's system has been completed, the claim will be rejected.

The reimbursement reductions identified in the grids below apply to services rendered or billed by enumerated and/or credentialed Mid-level practitioners on professional claims.

Certain Mid-level practitioners may not be listed in the grids below because they are aggregated into the attributed identifiers that do appear. Some of these are known as; Advanced Practice Nurse (APN), Certified Nurse Practitioner (CNP), Certified Registered Nurse (CRN), Marriage and Family Therapist (MFT), Professional Counselor of Mental Health, Social Worker, Licensed Graduate Social Worker (LGSW), Licensed Independent Clinical Social Worker (LICSW), and Certified Nurse Midwife.

Note: To confirm your specialty, please access the Provider Data Maintenance application via Availity.

Note: Mid-level practitioners are not Auxiliary Personnel. See the Provider Manual on the Provider Resource Center for more information on Auxiliary Personnel.

PENNSYLVANIA

Practitioner Reimbursement for Pennsylvania Commercial Products
85% of fee schedule
<ul style="list-style-type: none"> ▪ Clinical Nurse Specialist (CNS) – Mental Health ▪ Clinical Nurse Specialist (CNS) ▪ Certified Registered Nurse Practitioner (CRNP) ▪ Certified Registered Nurse Practitioner (CRNP) PCP ▪ Certified Registered Nurse Practitioner (CRNP) - Mental Health ▪ Licensed Clinical Social Workers (LCSW) ▪ Physician Assistants (where allowed by law) ▪ Physician Assistant PCP

75% of fee schedule
<ul style="list-style-type: none"> ▪ Licensed Associate Marriage and Family Therapist (LAMFT) ▪ Licensed Associate Professional Counselor (LAPC) ▪ Licensed Social Worker (LSW) ▪ Licensed Professional Counselor (LPC) ▪ Licensed Marriage and Family Therapist (LMFT)

Practitioner Reimbursement for Pennsylvania Medicare Advantage Products
85% of fee schedule
<ul style="list-style-type: none"> ▪ Clinical Nurse Specialist (CNS) – Mental Health ▪ Clinical Nurse Specialist (CNS) ▪ Certified Registered Nurse Practitioner (CRNP) PCP ▪ Certified Registered Nurse Practitioner (CRNP) ▪ Certified Registered Nurse Practitioner - Mental Health ▪ Licensed Clinical Social Workers (LCSW) ▪ Physician Assistants (where allowed by law) ▪ Physician Assistant PCP
75% of fee schedule
<ul style="list-style-type: none"> ▪ Licensed Professional Counselor (LPC) ▪ Licensed Marriage and Family Therapist (LMFT)

Note: The Plan follows standard CMS Mid-level practitioners / APPs fee schedule reductions for Medicare recognized practitioners when processing Medicare Advantage Claims.

DELAWARE

Practitioner Reimbursement for Delaware Commercial Products
85% of fee schedule
<ul style="list-style-type: none"> ▪ Clinical Nurse Specialist (CNS) – Mental Health ▪ Clinical Nurse Specialist (CNS) ▪ Certified Registered Nurse Practitioner (CRNP) ▪ Certified Registered Nurse Practitioner (CRNP) PCP ▪ Certified Registered Nurse Practitioner (CRNP) - Mental Health ▪ Licensed Clinical Social Workers (LCSW) ▪ Physician Assistants (where allowed by law) ▪ Physician Assistant PCP
75% of fee schedule
<ul style="list-style-type: none"> ▪ Licensed Marriage and Family Therapist (LAMFT) ▪ Licensed Associate Professional Counselor (LAPC) ▪ Licensed Social Worker (LSW) ▪ Licensed Professional Counselor (LPC) ▪ Licensed Marriage and Family Therapist (LMFT)

Practitioner Reimbursement for Delaware Medicare Advantage Products

85% of fee schedule

- Clinical Nurse Specialist (CNS) – Mental Health
- Clinical Nurse Specialist (CNS)
- Certified Registered Nurse Practitioner (CRNP) PCP
- Certified Registered Nurse Practitioner (CRNP)
- Certified Registered Nurse Practitioner - Mental Health
- Licensed Clinical Social Workers (LCSW)
- Physician Assistants (where allowed by law)
- Physician Assistant PCP

75% of fee schedule

- Licensed Professional Counselor (LPC)
- Licensed Marriage and Family Therapist (LMFT)

Note: The Plan follows standard CMS Mid-level practitioners / APPs fee schedule reductions for Medicare recognized practitioners when processing Medicare Advantage Claims.

NEW YORK

Practitioner Reimbursement for New York Commercial Products

85% of fee schedule

- Clinical Nurse Specialist (CNS)
- Certified Registered Nurse Practitioner (CRNP) PCP
- Certified Registered Nurse Practitioner (CRNP)
- Certified Registered Nurse Practitioner (CRNP) - Mental Health
- Midwifery
- Physician Assistants (where allowed by law)
- Physician Assistant PCP
- Registered Nurse First Assistant (RNFA)

Practitioner Reimbursement for New York Medicare Advantage Products

85% of fee schedule

- Clinical Nurse Specialist (CNS)
- Certified Registered Nurse Practitioner (CRNP) PCP
- Certified Registered Nurse Practitioner (CRNP)
- Certified Registered Nurse Practitioner (CRNP) - Mental Health
- Midwifery
- Physician Assistants (where allowed by law)
- Physician Assistant PCP

Note: The Plan follows standard CMS Mid-level practitioners / APPs fee schedule reductions for Medicare recognized practitioners when processing Medicare Advantage Claims.

Note: For New York region only, applicable to all products, mid-level reductions will apply to **provider unique specialty pricing fee schedules** unless specified otherwise in the provider's contract.

WEST VIRGINIA

Practitioner Reimbursement for West Virginia Medicare Advantage Products
85% of fee schedule
<ul style="list-style-type: none"> ▪ Clinical Nurse Specialist (CNS) – Mental Health ▪ Clinical Nurse Specialist (CNS) ▪ Certified Registered Nurse Practitioner (CRNP) PCP ▪ Certified Registered Nurse Practitioner (CRNP) ▪ Certified Registered Nurse Practitioner - Mental Health ▪ Licensed Clinical Social Workers (LCSW) ▪ Physician Assistants (where allowed by law) ▪ Physician Assistant PCP
75% of fee schedule
<ul style="list-style-type: none"> ▪ Licensed Professional Counselor (LPC) ▪ Licensed Marriage and Family Therapist (LMFT)

Note: The Plan follows standard CMS Mid-level practitioners / APPs fee schedule reductions for Medicare recognized practitioners when processing Medicare Advantage Claims.

DEFINITIONS:

Term or Acronym	Definition
APP	Advanced Practice Provider
APN	Advanced Practice Nurse
CMS	Centers for Medicare and Medicaid Services
CNM	Certified Nurse Midwife
CNP	Certified Nurse Practitioner
CNS	Clinical Nurse Specialist
CRNP	Certified Registered Nurse Practitioner
CRN	Certified Registered Nurse
Credentialed	Successfully completing the process if having education, training, and professional experience verified to meet the internal requirements of the Plan for serving as an in-network provider. Credentialed providers are included in the provider directory.
Enumerated	The assignment of a specific identifying number, a Blue Sheild ID, to a provider for submission on claims
LAMFT	Licensed Associate Marriage and Family Counselor
LAPC	Licensed Associate Professional Counselor
LCSW	Licensed Clinical Social Worker
LSW	Licensed Social Worker
LMFT	Licensed Marriage and Family Therapist
LPC	Licensed Professional Counselor

MFT	Marriage and Family Therapist
NM	Nurse Midwife
PA	Physician Assistant
PCP	Primary Care Physician
RNFA	Registered Nurse First Assistant

RELATED POLICIES:

Refer to the following Medical Policies for additional information:

- Commercial Policy Z-27: Eligible Providers

Refer to the following Reimbursement Policies for additional information:

- RP-001: Assistant Surgery
- RP-010: Incident-To Services
- RP-035: Correct Coding Guidelines
- RP-041: Services Not Separately Reimbursed
- RP-044: Medication Therapy Management Services

INFORMATION FOR CREDENTIALING AND ENUMERATION PROCESS AND REQUIREMENTS:

For credentialing process and requirements, please refer to the Provider Resource Center for your location. Choose the Provider Manual, Chapter 3 for details.

Failure of the Mid-Level practitioner to be enumerated in the Plan's system will result in:

1. Potential post-payment investigation and recoupment of claim reimbursement for noncompliance with this policy.
2. Potential rejection of the claim. The claim may be resubmitted for reimbursement consideration once the Mid-Level rendering provider is credentialed / enumerated in the Plan's system.

ADDITIONAL BILLING INFORMATION, REFERENCES AND GUIDELINES:

Provider Billing Manual; Chapter 6, Unit 4: Reporting Mid-level Provider Services for Medicare Advantage (Pennsylvania and West Virginia Only)

REFERENCES:

- Centers for Medicare and Medicaid Services; MLN Matters SE0441, issued August 23, 2016.
- Medicare Physicians Fee Schedule Final Rule Calendar Year (CY) 2021, 2023

- West Virginia Legislature; (2020) Senate Bill 787
http://wvlegislature.gov/Bill_Status/bills_text.cfm?billdoc=SB787%20SUB1%20enr.htm&yr=2020&sesstype=RS&i=787
- New York Insurance Law Section 4303
<https://www.nysenate.gov/legislation/laws/ISC/4303>

POLICY UPDATE HISTORY INFORMATION:

9 / 2023	Implementation
6 / 2024	Updated to include regional specific grids and added specialties

HISTORY

Highmark Reimbursement Policy Bulletin



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Subject: Mid-Level Practitioners and Advanced Practice Providers
Effective Date: September 25, 2023 **End Date:**
Issue Date: September 25, 2023 **Revised Date:** September 2023
Date Reviewed: June 2023
Source: Reimbursement Policy

Applicable Commercial Market

PA WV DE NY

Applicable Medicare Advantage Market

PA WV DE NY

Applicable Claim Type

UB 1500

➔ A checked box indicates the policy is applicable to that market either entirely, or partially, as indicated within the policy.

Reimbursement Policy designation of Professional or Facility application is based on how the provider is contracted with the Plan. This Policy supersedes direction provided in Bulletins prior to the effective date of this policy.

PURPOSE:

The Plan has based this reimbursement policy on the guidelines established by the Centers for Medicare and Medicaid Services (CMS) regarding the reimbursement of “Mid-Level”, non-physician providers; including, but not limited to, Physician Assistants (PA), Nurse Practitioners (NP) and Clinical Nurse Specialists (CNS).

REIMBURSEMENT GUIDELINES:

The following services billed by an advanced practice provider (APP) or mid-level practitioner will be reimbursed at 100 percent of the fee schedule allowance when covered:

- Laboratory services
- Injected or infused drugs
- Supplies
- After-hours services
- Diagnosis tests

Additionally, mid-level providers with specific rates in their contract and providers contracted through a third-party vendor will supersede and not apply to this policy direction. Services rendered by Certified Registered Nurse Anesthetists (CRNA) also do not apply to this policy.

Payment for assistant-at-surgery shall follow the same rules for eligible procedures as for physicians following the direction in RP-001: Assistant at Surgery Services.

The Plan will consider medical services provided by a Mid-Level practitioner or APP for reimbursement under the following criteria:

- The service(s) provided is/are considered a physicians' service and is a covered service under the member's benefit plan.
 - Services that traditionally have been reserved to physicians, such as physical examinations, minor surgery, setting casts for simple fractures, interpreting x-rays and other activities that involve an independent evaluation or treatment of the patient's condition.
- The service(s) provided is/are within the Mid-Level practitioner's scope of practice.
- Claims include assigned individual Mid-Level practitioner NPI Number.
- Mid-Level Providers must be credentialed.

Note: If the APP has not received confirmation from the Plan that enumeration within the Plan's system has been completed, the claim will be rejected.

The following reimbursement reductions apply to services rendered or billed by enumerated / credentialed APP's regardless of where the services are provided.

Note: For New York region only, applicable to all products, mid-level reductions will apply to provider unique pricing unless specified otherwise in the provider's contract.

Commercial and Medicare Advantage Reductions (Asterisk denotes not applicable to New York Region)	
Practitioner	Reimbursement (% of fee schedule)
▪ Social Worker* (grandfathered only)	65%
▪ Master Level Therapists* ▪ Licensed Clinical Social Workers (LCSWs)* ▪ Marriage and Family Therapists* ▪ Social Worker*	75%
▪ Certified Registered Nurse Practitioner ▪ CRN Clinical Nurse Specialist – Mental Health* ▪ CRN Clinical Nurse Specialist ▪ Physician Assistants (where allowed by law) ▪ Physician Assistant PCP ▪ Clinical Registered Nurse Practitioner (CRNP) PCP ▪ Certified Registered Nurse	85%
<u>Below are applicable to New York Region ONLY</u>	
▪ Certified Nurse Midwife ▪ Registered Nurse First Assistant (RNFA)	

* Not applicable to New York Region

Note: The Plan follows standard CMS APPs fee schedule reductions for Medicare recognized practitioners when processing Medicare Advantage (MA) Claims.

Note: In Pennsylvania, social workers with license type CW are grandfathered but no longer accepted as new credentialing applicants.

DEFINITIONS:

Term or Acronym	Definition
APP	Advanced Practice Provider
CMS	Centers for Medicare and Medicaid Services
CNM	Certified Nurse Midwife
CNS	Clinical Nurse Specialist
COMM	Commercial
CRNA	Certified Registered Nurse Anesthetist
CRNP	Clinical Registered Nurse Practitioner
CRN	Clinical Registered Nurse
Credentialed	Successfully completing the process if having education, training, and professional experience verified to meet the internal requirements of the Plan for serving as an in-network provider
Enumerated	The assignment of a specific identifying number to a provider for submission on claims
LCSW	Licensed Clinical Social Workers
MA	Medicare Advantage
NM	Nurse Midwife
NP	Nurse Practitioner
PA	Physician Assistant
PCP	Primary Care Physician
RNFA	Registered Nurse First Assistant

RELATED POLICIES:

Refer to the following Medical Policies for additional information:

- Commercial Policy Z-27: Eligible Providers

Refer to the following Reimbursement Policies for additional information:

- RP-001: Assistant Surgery
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- RP-044: Medication Therapy Management Services

ADDITIONAL BILLING INFORMATION, REFERENCES AND GUIDELINES:

- Provider Billing Manual; Chapter 6, Unit 4: Reporting Mid-level Provider Services for Medicare Advantage (Pennsylvania and West Virginia Only)

REFERENCES:

- Centers for Medicare and Medicaid Services; MLN Matters SE0441, issued August 23, 2016.
- Medicare Physicians Fee Schedule Final Rule Calendar Year (CY) 2021, 2023
- West Virginia Legislature; (2020) Senate Bill 787
http://wvlegislature.gov/Bill_Status/bills_text.cfm?billdoc=SB787%20SUB1%20enr.htm&yr=2020&sesstype=RS&i=787
- New York Insurance Law Section 4303
<https://www.nysenate.gov/legislation/laws/ISC/4303>

POLICY UPDATE HISTORY INFORMATION:

9 / 2023	Implementation
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HISTORICAL