

IHCP *bulletin*

INDIANA HEALTH COVERAGE PROGRAMS BT201839 JULY 31, 2018

Physician assistants required to enroll as IHCP providers

In *Indiana Health Coverage Programs (IHCP) Bulletin [BT201743](#)*, the IHCP announced expansion of its eligible providers to include physician assistants. The bulletin further stated this policy change **allowed** professionally licensed physician assistants to independently enroll with the IHCP beginning August 1, 2017. The IHCP's intentions were to require the independent enrollment of physician assistants. Accordingly, effective September 1, 2018, the IHCP is updating its policy to **require** physician assistants to independently enroll with the IHCP to be eligible for reimbursement. These providers will be classified using the following provider type and specialty code: provider type 10 – *Physician Assistant* and specialty code 100 – *Physician Assistant*.

Physician assistants must have a National Provider Identifier (NPI) and hold a valid professional license to enroll with the IHCP. Physician assistants are eligible to enroll as billing providers and as rendering providers under a group practice. Enrollment applications should be submitted using the IHCP Provider Healthcare Portal or using the appropriate IHCP provider enrollment packet. After enrolling as a provider with the IHCP, physician assistants may contract as a provider with the IHCP's managed care programs – Healthy Indiana Plan (HIP), Hoosier Healthwise, or Hoosier Care Connect – by applying directly with one or more of the managed care entities (MCEs) offering health plans for those programs. A physician assistant participating in an MCE network is eligible to serve as a primary medical provider (PMP). Additionally, physician assistants can serve as Right Choices Program (RCP) providers.



For dates of service on or after September 1, 2018, fee-for-service claims submitted for physician assistant services must be billed using the physician assistant's NPI rather than the NPI of the supervising physician, and services will be paid at 75% of the allowed amount with the following exceptions:

- Physician assistant services for "assistant surgery" should be billed with the physician assistant's NPI as well as the AS modifier; reimbursement for these services is paid at 20% of the already reduced rate (20% of 75%).
- Physician assistant services rendered through a federally qualified health center (FQHC) or rural health clinic (RHC) should be billed using the physician assistant's NPI as the rendering provider; reimbursement for these services is based on provider-specific encounter methodology.

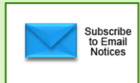
Individual MCEs establish reimbursement and billing guidelines within the managed care delivery system. Questions about managed care reimbursement and billing for physician assistant services should be directed to the MCE with which the member is enrolled.

QUESTIONS?

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