Overview
“Incident to” services are defined as services and supplies commonly furnished in a physician’s office, which are “incident to” the professional services of a physician or a Non-Physician Practitioner (NPP) and provided by auxiliary personnel. This is limited to situations in which there is direct physician/non-physician personal supervision. This applies to auxiliary personnel under the supervision of the physician/non-physician, which includes, but is not limited to, nurses, technicians, therapists, NPPs, etc.

Requirements
Requirements for “incident to” are:
- The services are commonly furnished in a physician’s office.
- The physician must have initially seen the patient.
- There is direct personal supervision by the physician of auxiliary personnel, regardless of whether the individual is an employee, leased employee or independent contractor of the physician.
- The physician has an active part in the ongoing care of the patient.

Direct supervision in the office setting does not mean that the physician/non-physician must be present in the same room with his aide. However, the physician must be present in the office suite and immediately available to provide assistance and direction while the aide is performing services.

Coverage Criteria
For certain services to be covered under the “incident to” provision, conditions must be met in addition to the standard coverage criteria that are applicable. The services must be:
- An integral, although incidental, part of a professional service of a physician.
- Commonly rendered without charge or included in the physician’s bill.
- Of a type that is commonly furnished in physicians’ offices or clinics.
- Furnished by the physician or by auxiliary personnel under the physician’s direct supervision.

Note: Some “incident to” services to homebound patients may be allowed under a physician’s general supervision.

‘Incident To’ A Physician’s Professional Services
“Incident to” a physician’s professional services means the services or supplies are furnished as an integral, although incidental, part of the physician’s personal professional services in the course of diagnosis or treatment of an injury or illness.

Medicare pays for services and supplies (including drugs and biologicals that are not usually self-administered):
- Furnished “incident to” a physician’s or other practitioner’s services.
- Commonly included in the physician’s or practitioner’s bills.
- For which payment is not made under a separate benefit category listed in Section 1861(s) of the Act.

Medicare will not apply “incident to” requirements to services having their own benefit category. Rather, these services should meet the requirements of their own benefit category.

Note: Pneumococcal, influenza and hepatitis B vaccines are covered under Section 1861(s)(10) of the Act and need not also meet “incident to” requirements.
PAs, NPs, CNSs, 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 and under direct physician supervision, they may be covered as “incident to” services, in which case, the “incident to” requirements would apply.

Non-Physician Practitioners
Furnished ‘Incident to’ a Physician’s Services in addition to coverage being available for the services of such auxiliary personnel as nurses,
Each day comes bearing its own gifts.

Untie the ribbons.

~~Ruth Ann Schabacker