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not bill Medicare or the beneficiary for the consultation that is required under paragraph (c) of this section.

[63 FR 20128, Apr. 23, 1998]

§410.74 Physician assistants' services.

- (a) Basic rule. Medicare Part B covers physician assistants' services only if the following conditions are met:
- (1) The services would be covered as physicians' services if furnished by a physician (a doctor of medicine or osteopathy, as set forth in section 1861(r)(1) of the Act).
 - (2) The physician assistant—
- (i) Meets the qualifications set forth in paragraph (c) of this section;
- (ii) Is legally authorized to perform the services in the State in which they are performed:
- (iii) Performs services that are not otherwise precluded from coverage because of a statutory exclusion;
- (iv) Performs the services under the general supervision of a physician (The supervising physician need not be physicially present when the physician assistant is performing the services unless required by State law; however, the supervising physician must be immediately available to the physician assistant for consultation.);
- (v) Furnishes services that are billed by the employer of a physician assistant; and
 - (vi) Performs the services—
- (A) In all settings in either rural and urban areas; or
 - (B) As an assistant at surgery.
- (b) Services and supplies furnished incident to a physician assistant's services. Medicare covers services and supplies (including drugs and biologicals that cannot be self-administered) that are furnished incident to the physician assistant's services described in paragraph (a) of this section. These services and supplies are covered only if they—
- (1) Would be covered if furnished by a physician or as incident to the professional services of a physician;
- (2) Are the type that are commonly furnished in a physician's office and are either furnished without charge or are included in the bill for the physician assistants' services;
- (3) Are, although incidental, an integral part of the professional service performed by the physician;

- (4) Are performed under the direct supervision of the physician assistant (that is, the physician assistant is physically present and immediately available); and
- (5) Are performed by the employee of a physician assistant or an entity that employs both the physician assistant and the person providing the services.
- (c) Qualifications. For Medicare Part B coverage of his or her services, a physician assistant must meet all of the following conditions:
- (1) Have graduated from a physician assistant educational program that is accredited by the Commission on Accreditation of Allied Health Education Programs; or
- (2) Have passed the national certification examination that is administered by the National Commission on Certification of Physician Assistants; and
- (3) Be licensed by the State to practice as a physician assistant.
- (d) Professional services. Physician assistants can be paid for professional services only if the services have been professionally performed by them and no facility or other provider charges for the service or is paid any amount for the furnishing of those professional services.
- (1) Supervision of other nonphysician staff by a physician assistant does not constitute personal performance of a professional service by the physician assistant.
- (2) The services are provided on an assignment-related basis, and the physician assistant may not charge a beneficiary for a service not payable under this provision. If a beneficiary has made payment for a service, the physician assistant must make the appropriate refund to the beneficiary.

[63 FR 58907, Nov. 2, 1998; 64 FR 25457, May 12, 1999]

§ 410.75 Nurse practitioners' services.

- (a) *Definition*. As used in this section, the term "physician" means a doctor of medicine or osteopathy, as set forth in section 1861(r)(1) of the Act.
- (b) Qualifications. For Medicare Part B coverage of his or her services, a nurse practitioner must be a registered professional nurse who is authorized by