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|  | <b>JOHNS HOPKINS HEALTHCARE</b>  | <b>Policy Number: PNM.015</b><br>Effective Date: 7/1/2011 |
|   | <b>Subject: Physician Assistant Reimbursement</b><br><b>Department: Provider Relations</b><br><b>Lines-of-Business: EHP, Priority Partners</b> | <b>Page 1 of 4</b>  |

**ACTION**

- New Policy
- Superseding Policy Number:
- Repealing Policy Number: CMUM65

**POLICY:**

It is the policy of Johns Hopkins HealthCare (JHHC) to reimburse Physician Assistants (PAs) that meet the criteria outlined herein.

**SCOPE:**


This policy applies to Physician Assistants contracted and credentialed within the JHHC provider network for Employer Health Programs (EHP) and Priority Partners MCO (PPMCO).

**DEFINITIONS:**

1. Physician Assistants (PAs) are academically and clinically prepared to provide healthcare services under the supervision of a Doctor of Medicine (MD) or Doctor of Osteopathy (DO).<sup>1</sup>
2. Coverage is limited to the services a PA is legally authorized to perform within their scope of practice and in accordance with the state regulatory mechanism provided by state law.<sup>2</sup>
  - a. According to the Maryland Department of Health and Mental Hygiene, Board of Physicians, a Physician Assistant’s scope of practice is limited to acts:
    - Delegated by the supervising physician;
    - Appropriate to the Physician Assistant’s education, training, and experience;
    - Customary to the practice of the supervising physician;
    - Consistent with the delegation agreement submitted to the Board.

**RESPONSIBILITIES:**

It is the responsibility of the Provider Relations Department to contract with Physician Assistant’s as appropriate and within the guidelines outlined within this policy. It is the


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responsibility of the Credentialing Department to credential the PA following appropriate guidelines outlined within this policy.


1. The Physician Assistant must meet the applicable state requirements governing the qualifications for Physician Assistants and at least one of the following conditions:
  - a. Is currently certified by the National Commission on Certification of Physician Assistants to assist primary care physicians, or
  - b. Has satisfactorily completed a program for preparing Physician Assistants that:
    - Was at least 1 academic year in length;
    - Consisted of supervised clinical practice and at least 4 months (in the aggregate) of classroom instruction directed toward preparing students to deliver health care; and
    - Was accredited by the American Medical Association’s Committee on Allied Health Education and Accreditation; or
  - c. Has satisfactorily completed a formal educational program for preparing Physician Assistants that does not meet the requirements of paragraph 1b. and had been assisting primary care physicians for a minimum of 12 months during the 18-month period immediately preceding January 1, 1987.
2. The Physician Assistant must be licensed by the State to practice as a Physician Assistant.<sup>3</sup>
3. The services rendered must meet all other standards of medical coverage.

**PAYMENT METHODOLOGY FOR EMPLOYER HEALTH PROGRAMS & PRIORITY PARTNERS:**

1. **Payment Methodology for Physician Assistants for Services Rendered:**
  - a. The PA must have their individual “practitioner” National Provider Identifier (NPI).
  - b. Physician Assistant services are paid at the lesser of the actual charge or Eighty-Five percent (85%) of the physician fee schedule.
2. **Payment Methodology for Physician Assistants Acting as Assistant Surgeons:**
  - a. It is the policy of Johns Hopkins HealthCare to follow the procedure logic in code review which dictates (by code) what procedures qualify for reimbursement to an assistant surgeon. Any exceptions (an extraordinarily complicated patient for example) will be dealt with individually upon written appeal.
  - b. JHHC shall compensate provider for covered services rendered by PAs at Sixteen-Percent (16%) of the Assistant Surgeon’s allowable fee, with Assistant Surgeon’s allowable fee defined as Eighty-Five percent (85%) of the Physician Fee Schedule.

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- c. The AS modifier must be used when submitting claims when PAs are acting as Assistant Surgeons.
- d. When a surgery is paid on a global charge basis, including a specified number of days of postoperative care, any postoperative services billed by the PA during this period of time are paid only when the physician's global fee for surgery has been reduced to reflect that the services covered under the procedure code have been reduced or eliminated.<sup>4</sup>

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**REFERENCES:**

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**CROSS REFERENCE:**

PCR.003 Criteria for Practitioner Participation