

APP Supervision and Diagnostic Tests: Clarification from CMS



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If your medical practice offers imaging services, a recent clarification from the Centers for Medicare & Medicaid Services (CMS) requires attention. The March 16 2023 memo entitled: [“Supervision Requirements for Diagnostic Tests: Manual Update”](#) outlines the circumstances for which advanced practice providers (APPs) may provide diagnostic tests. Specifically, CMS states:

“When NPs, CNSs, and PAs personally perform diagnostic tests ... the supervision/collaboration requirements ... don’t apply. Rather, these practitioners are authorized to personally perform diagnostic tests under the supervision/collaboration requirements applicable to their practitioner benefit category pursuant to state scope of practice laws and under the applicable state requirements.” [Accordingly], “diagnostic tests can’t be billed to Medicare as incident to services.”

The topic isn’t a novel one; indeed, CMS expanded the supervision requirements in 2021.

At the time, however, stakeholders were left confused by the language of the rulemaking. The 2021 Final Rule stated that a *physician* may offer general supervision of diagnostic tests, with no mention of nurse practitioners, certified nurse specialists, or physician assistants. Further, the tests that require personal supervision dictate that a *physician* must be in attendance, according to the then-published text.

Although it took two years, the recent memo provides clarity to the supervision requirements. Advanced practice providers may supervise diagnostic tests. CMS edited the language in the Medicare Benefit Policy Manual to read:

*“Direct Supervision - in the office setting means the physician (**or other supervising practitioner**) must be present in the office suite and immediately available to furnish assistance and direction...”*

This new language was accompanied by additional clarifications and can be reviewed at this [link](#).

To determine the application of this newly clarified rule for your practice, the supervision requirements for the imaging test(s) being performed must be understood. The manufacturer of the equipment may be a resource; however, the rules change, and it's better to go directly to the source of the regulations – the federal government. To query CMS' requirements, [look up the CPT code](#) under the Physician Fee Schedule.

There is a column titled **“Phys Supv”** that reveals the level of required supervision. (See [this manual](#) for instructions about the tool, as well as descriptions of the supervision levels. Note that this guide has not yet been updated with the newly released requirements, as of the time of the publication of this article.)

The clarification from CMS is welcome as it helps sift through the once muddy water. Despite the changes in federal rulemaking, however, remember that APPs must act within their scope of practice under state licensing laws. Therefore, state regulations must be reviewed (and followed) as well.

If you have questions about this recent clarification, or other practice management issues, please contact SVMIC's Medical Practice Services department at 800.342.2239 or ContactSVMIC@svmic.com

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