**Tufts Medicare Preferred HMO and Tufts Health Plan Senior Care Options Nurse Practitioner and Physician Assistant Professional Payment Policy**

The following payment policy applies to nurse practitioners (NPs) and physician assistants (PAs) who are contracted with Tufts Medicare Preferred HMO and/or Tufts Health Plan Senior Care Options (SCO), as well as noncontracted NPs and PAs who provide medically necessary covered services to members. For information on Commercial products, [click here](#).

In addition to the specific information contained here, providers must adhere to the policy information outlined in the professional payment policies for [Commercial](#) and [Tufts Medicare Preferred HMO/Tufts Health Plan SCO](#) products, located in the Provider [Resource Center](#) or on the [Payment Policies](#) page.

**Note:** Audit and disclaimer information is located at the end of this document.

**POLICY**
Tufts Health Plan covers medically necessary covered services performed by NPs and PAs.

**Contracting NPs and PAs**
NPs and PAs who are contracted with Tufts Medicare Preferred HMO and/or Tufts Health Plan SCO are listed in the Provider Directory with a designation of primary care providers (PCPs) or specialists. NPs and PAs with a PCP designation are allowed to have a member panel, and can be chosen by members as primary care providers (PCPs).

**Noncontracting NPs and PAs**
NPs and PAs who are not contracted with Tufts Medicare Preferred HMO and/or Tufts Health Plan SCO can render medically necessary covered services under a collaborating [contracting](#) provider. Claims must be submitted by the collaborating provider. Noncontracting NPs and PAs may not be chosen as PCPs.

**GENERAL BENEFIT INFORMATION**
Services and subsequent payment are based on the member's benefit plan document. Member eligibility and benefit specifics should be verified prior to initiating services by logging on to our secure [Provider website](#) or by contacting [Provider Relations](#).

**Note:** There is no member responsibility for Tufts Health Plan SCO members.

**BILLING INSTRUCTIONS**
- Participating NPs and PAs should submit claims with their NPI in Box 33
- Nonparticipating NPs and PAs should submit claims with the collaborating provider’s NPI in Box 33.

**Registered Nurse Clinical Specialist**
Registered nurse clinical specialist (RNCS) behavioral health (BH) providers follow the same billing guidelines as BH providers. Refer to the [Outpatient Behavioral Health and Substance Use Disorder Payment Policy](#) for information on how to bill for RNCS BH services.

**ADDITIONAL RESOURCES**
- [Anesthesia Payment Policy](#)
- [Evaluation and Management Payment Policy](#)

**DOCUMENT HISTORY**
- January 2017: Policy reviewed; template updates; combined Nurse Practitioner and Physician Assistant policies
- September 2015: Template conversion
- July 2015: Template updates
- November 2014: Updated policy statement and description, template updates.
- April 2014: Added information regarding Tufts Health Plan SCO, template updates.
- May 2013: Template updates
- April 2011: Added information regarding Tufts Medicare Preferred PPO product.
- January 2010: Reviewed for clarity; no content changes made.
• May 2009: Moved NP to its own document.
• March 2009: Moved Tufts Medicare Preferred information to its own document.
• August 2008: Added information on RNCS mental health providers.
• March 2008: Removed Massachusetts, Rhode Island and New Hampshire references.
• July 2007: Added Tufts Medicare Preferred information.

AUDIT AND DISCLAIMER INFORMATION
Tufts Health Plan reserves the right to conduct audits on any provider and/or facility to ensure compliance with the guidelines stated in this payment policy. If such an audit determines that your office/facility did not comply with this payment policy, Tufts Health Plan will expect your office/facility to refund all payments related to non-compliance. For more information about Tufts Health Plan’s audit policies, refer to our website.

This policy provides information on Tufts Medicare Preferred HMO and Tufts Health Plan Senior Care Options claims adjudication processing guidelines. As every claim is unique, the use of this policy is neither a guarantee of payment nor a final prediction of how specific claim(s) will be adjudicated. Claims payment is subject to member eligibility and benefits on the date of service, coordination of benefits, referral/authorization and utilization management guidelines when applicable, adherence to plan policies and procedures, and claims editing logic.