 JOHNS HOPKINS MEDICINE JOHNS HOPKINS HEALTHCARE	JOHNS HOPKINS HEALTHCARE	Policy Number: RPC.012 Effective Date: 5/1/2012 Revision Date: 11/1/2017
	Subject: Nurse Practitioner Reimbursement Department: Provider Relations Lines of Business: EHP, USFHP, and PPMCO	Page 1 of 3

ACTION

- New Policy
- Repealed Policy Date: _____
- Superseded Policy Number: _____

The most current version of the reimbursement policies can be found on www.jhbc.com.


These policies serve as a guide to assist you in accurate claim submissions and to outline the basis for reimbursement if the service is covered by a member's Johns Hopkins HealthCare (JHHC) benefit plan. The determination that a service, procedure, item, etc. is covered under a member's benefit plan is not a determination that you will be reimbursed. Services must meet authorization and medical necessity guidelines appropriate to the procedure and diagnosis as well as to the member's state of residence. You must follow proper billing and submission guidelines. You are required to use industry standard, compliant codes on all claim submissions. Services must be billed with ICD-10 codes, CPT codes, HCPCS codes and/or revenue codes. The codes denote the services and/or procedures performed. The billed code(s) are required to be fully supported in the medical record and/or office notes. Unless otherwise noted within the policy, our policies apply to both participating and nonparticipating providers and facilities.

If appropriate coding/billing guidelines or current Reimbursement Policies are not followed, Johns Hopkins HealthCare (JHHC) may:

- Reject or deny the claim
- Recover and/or recoup claim payment

JHHC reimbursement policies are developed based on nationally accepted industry standards and coding principles. These policies may be superseded by mandates in provider or state contracts, or state, federal or CMS contracts and/or requirements. System logic or setup may prevent the loading of policies into the claims platforms in the same manner as described; however, JHHC strives to minimize these variations.

JHHC reserves the right to review and revise our policies periodically when necessary. When there is an update, we will publish the most current policy on www.jhbc.com.

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POLICY

It is the policy of Johns Hopkins HealthCare LLC (JHHC) to reimburse Nurse Practitioners (NP) that meet the criteria outlined herein.

This policy applies to Nurse Practitioners contracted and credentialed within the JHHC provider network for Employer Health Programs (EHP), US Family Health Plan (USFHP), and Priority Partners MCO (PPMCO).

In the United States, because the profession is state-regulated, care provided by Nurse Practitioners (NP) varies widely. NPs work independently of physicians while, in other states, a collaborative agreement with a physician is required to practice. The extent of this collaborative agreement, and the role, duties, tasks, medical treatments, pharmacologic and prescriptions, etc., it affords an NP to perform and prescribe, again this varies widely amongst states of licensure.

Nurse Practitioners (NP) Payment Methodology for Services Rendered:

- a. The NP must have his/her own “practitioner” National Provider Identifier (NPI).
- b. Nurse Practitioner services are paid at the lesser of the actual charge then in effect or an amount equal to One-Hundred percent (100%) of the physician fee schedule.


It is the responsibility of the Provider Relations Department to contract with Nurse Practitioners as appropriate and within the guidelines outlined within this policy. It is the responsibility of the Credentialing Department to credential the NP following appropriate guidelines outlined within this policy.

DEFINITIONS

A Nurse Practitioner (NP) is an Advanced Practice Nurse (APN) who has completed graduate-level education (either a Master’s or a Doctoral degree). All Advance Practice Nurse are Registered Nurses who sought additional training and education. To become licensed to practice, NP’s hold certification in an area of specialty (family practice, obstetrics and gynecology, pediatrics, adult care, acute care, etc.), and are licensed through nursing boards rather than medical boards. The core philosophy of the field is individualized care.

EXCLUSIONS

N/A

 JOHNS HOPKINS M E D I C I N E <hr/> JOHNS HOPKINS H E A L T H C A R E	JOHNS HOPKINS HEALTHCARE	Policy Number: RPC.012 Effective Date: 5/1/2012 Revision Date: 11/1/2017
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EXEMPTIONS

N/A

CROSS REFERENCE (with other relevant policies, procedures, and/or workflows)

This policy has been developed through consideration of the following:

1. PCR.002 Criteria for Practitioner Participation, Review & Decision Process, Ongoing Monitoring
2. RPC.009 Scope of Practice
3. TRICARE Policy Manual 6010.57-M, February 1, 2008, Chapter 11, Section 1.1
4. Nurse Practitioner COMAR Regulations, 10.27.07.02 at:
<http://www.dsd.state.md.us/comar/comarhtml/10/10.27.07.02.htm>
5. Comar Regulations, 10.09.01 at: <https://health.maryland.gov/reg/Pages/10-09-01,-10-09-21-and-10-09-39-.aspx>

APPROVALS

Steering Committee Approval Date:

Last Review Dates: