

Incident to Billing Policy

**Blue Cross and Blue Shield of Montana
Network Management Administrative Policy
Version: N017.1**

Original Effective Date: 7/19/17
Version Effective Date: 01/11/2022
Replaces: N017

Scope This policy applies to providers who submit claims for all Blue Cross and Blue Shield of Montana (BCBSMT) lines of business except Medicare.

Purpose This policy documents BCBSMT administrative guidelines for Incident-To billing.

Policy The Centers for Medicare and Medicaid (CMS) defines incident-to services as those that are “furnished incident to physician professional services in the physician’s office (whether located within a different office suite or within an organization) or in the patient’s home.” Incident-to billing is an allowable practice when billing Medicare, as long as you meet the specific requirements set forth by Medicare.

BCBSMT, however, does not recognize incident-to billing, but requires that claims be billed under the name of the provider who actually rendered the service.

Providers must submit claims for services under the NPI number assigned to them; submitting claims for payment under another provider’s NPI may be considered fraud as defined under Montana Code Annotated 33-1-1202(1). A provider may not let another provider use their NPI number to submit claims to BCBSMT except as described in the Locum Tenens Policy or Provider-in- Training Policy.

Submit claims for services provided by a non-physician practitioner under their NPI, they are subject to a different fee schedule. This holds true whether the non-physician provider is supervised by a physician or not.

**Rationale/
Source** This policy documents BCBSMT business operations.

Cross-References

For additional information, refer to the following:

Document Name
BCBSMT Commercial Provider Manual
N002 Locum Tenens Provider Policy
N005 Provider ID Policy
N006 Provider In Training Policy

Formal Review or Revision Date History

This policy was reviewed or revised, and approved as documented below:

Version	Date	Summary of Changes
N017	07/19/2017	<i>New</i>
N017	01/12/2021	<i>Annual review – no changes</i>
N017.1	01/11/2022	<i>Updated Executive Approval. Updated cross reference document names</i>

Governance

Responsibility for adoption and/or implementation of this policy is as follows:

Executive Approval	Date
Signature on File	
David Lechner, M.D. VP Health Care Delivery & Chief Medical Officer	01/11/2022