



Supervision Requirements for Diagnostic Tests: Manual Update

Related CR Release Date: March 16, 2023

MLN Matters Number: MM13094

Effective Date: January 1, 2021

Related Change Request (CR) Number: [CR 13094](#)

Implementation Date: May 17, 2023

Related CR Transmittal Number: R11901BP

Related CR Title: Update to the Manual to Clarify Supervision Requirements for Diagnostic Tests

Affected Providers

- Laboratories that aren't independent diagnostic testing laboratories
- Hospitals
- Physicians
- Other providers billing Medicare Administrative Contractors (MACs) for diagnostic tests they provide to Medicare patients

Action Needed

Make sure your billing staff knows about these changes:

- Expanded list of provider types authorized to supervise diagnostic tests
- Updates to Medicare Benefit Policy Manual

Background

CR 13094 updates provisions to the diagnostic tests benefit category under Section 1861(s)(3) of the [Social Security Act](#) (the Act) and [42 CFR 410.32](#). In the CY 2021 Physician Fee Schedule (PFS) final rule, we authorized nurse practitioners (NPs), clinical nurse specialists (CNSs), certified nurse-midwives (CNMs), certified registered nurse anesthetists (CRNAs), and physician assistants (PAs) to supervise the performance of diagnostic tests in addition to physicians.

The CY 2021 PFS final rule restated policy that allows NPs, CNSs, and PAs when personally performing diagnostic tests to do so in accordance with the supervision/collaboration requirements under their respective statutory benefit category.

You had to perform diagnostic tests covered under Section 1861(s)(3) of the Act and payable under the PFS, with certain exceptions listed in the regulation, under the supervision of an individual meeting the definition of a physician. However, effective January 1, 2021, this basic

rule regarding individuals supervising the performance of diagnostic tests also includes NPs, CNSs, CNMs, CRNAs, and PAs.

When NPs, CNSs, and PAs personally perform diagnostic tests as provided under Section 1861(s)(2)(K) of the Act, the supervision/collaboration requirements under Section 1861(s)(3) of the Act and 42 CFR 410.32 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.

Because the diagnostic tests benefit category in Section 1861(s)(3) of the Act is separately listed and distinct from the incident to benefit category in Section 1861(s)(2)(A) of the Act, diagnostic tests can't be billed to Medicare as incident to services. Accordingly, the supervision requirements under the incident to benefit category aren't applicable to the diagnostic tests benefit category.

Note: The relevant updated Manual text, found in Chapter 15, Section 80 of the Medicare Benefit Policy Manual is part of [CR 13094](#).

More Information

We issued CR 13094 to your MAC as the official instruction for this change.

For more information, [find your MAC's website](#).

Document History

Date of Change	Description
March 20, 2023	Initial article released.

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