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CHAPTER 5: PROFESSIONAL SERVICES

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SECTION 5.1: COVERED SERVICES

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**Advanced Practice Registered Nurses: Clinical Nurse Specialists, Certified Nurse Practitioners, and Certified Nurse Midwives**

An advanced practice registered nurse (APRN) must hold a current, unencumbered and valid license from the Louisiana Board of Nursing to participate in Louisiana Medicaid. Nurses licensed as APRNs include:

1. Clinical Nurse Specialists (CNS);
2. Certified Nurse Practitioners (CNP); and
3. Certified Nurse Midwives (CNM).

Advanced practice registered nurses shall comply with their scope of practice as authorized by Louisiana state law and regulations.

**Billing Information**

APRNs must obtain an individual Medicaid provider number.

APRNs **not** linked to a physician group must place their individual provider numbers in block 33B on the CMS 1500 claim form, or the appropriate loop and segment of the 837P as the billing provider.

Physicians who employ or contract with APRNs must obtain group provider numbers and link the individual APRN provider number to the group number. Physician groups must notify, in writing, the fiscal intermediary's Provider Enrollment Unit of such employment or contract(s) when APRNs are added/removed from the group.

1. Services provided by an APRN **must be identified** by entering the provider number of the APRN in block 24J and the group number in block 33B on the CMS 1500 claim form as well as the appropriate loop and segment for the 837P.
2. APRNs employed or under contract to a group or facility may not bill individually for the same services for which reimbursement is made to the group or facility.

**Reimbursement**

Unless otherwise excluded by the Medicaid program, coverage of services will be determined by individual licensure, scope of practice, and terms of the physician collaborative agreement. Collaborative agreements must be available for review upon request by authorized representatives of the Medicaid program.

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Early and Periodic Screening, Diagnostic and Treatment (EPSDT) medical, vision, and hearing preventive services, immunizations, physician-administered medications, and long-acting reversible contraceptives (LARCs) are reimbursed at 100 percent of the physician fee on file. All other payable procedures are reimbursed at 80 percent of the physician fee on file.

Qualified APRNs who perform as first assistant in surgery should use the “AS” modifier to identify these services.