



Kansas City

An Independent Licensee of the Blue Cross and Blue Shield Association

## **Advanced Practice Nurses (APN); Advanced Registered Nurse Practitioners (APRN) and Certified Registered Nurse Anesthetists (CRNA)**

**Policy Number:** POLPP104

**Last Review:** 7/1/2019

**Effective Date:** 7/1/2019

**Next Review:** 7/1/2020

---

### **Description**

This policy addresses Blue KC coding and coverage for APN, ARNP and CRNA. Both Missouri and Kansas statutes provide for collaborative practice arrangements between physicians and nurses.

Under such agreements the nurse may administer, dispense or prescribe drugs and provide treatment to patients as long as the nurse is acting within the nursing scope of practice. The nurse must meet certain educational or accreditation requirements (credentialing) and have a written collaborative practice arrangement with a licensed physician.

**APN** – Advanced Practice Nurse.

**ARNP** – Advanced Registered Nurse Practitioner.

**CRNA** – Certified Registered Nurse Anesthetists.

---

### **Policy**

#### **Advance Practice Nurses (APN) and Advanced Registered Nurse Practitioners (ARNP)**

Services that are otherwise covered under a member's benefit plan will be treated as covered services when provided by an advanced practice registered nurse when the following requirements are met:

- The nurse must meet the educational and/or accreditation requirements of state statute or regulation.
- The nurse must have entered into a written agreement, protocol or standing orders with a licensed physician delineating the scope and

authority of the nurse in a collaborative practice arrangement. All services performed by the APN/ARNP within this scope and authority should be submitted by the APN/ARNP.

- The nurse must provide services within the scale of practice of professional nursing.

### **Certified Registered Nurse Anesthetists (CRNA)**

Claims from independently practicing CRNA's (not part of a physician group) may be approved for payment if the CRNA has a current participation contract with Blue KC. Payment for services will be directed to the independently practicing CRNA (or CRNA group). If the CRNA has been credentialed, network agreements may also be offered and benefit payment should be based on specific product / network status.

For CRNA's who are employed by a DO or MD, claims typically will be submitted under the name and NPI number of the employing physician.

### **Nurses as Surgical Assistants**

Certified Registered Nurse First Assistants (CRNFA) are not licensed, certified or controlled in any way beyond having to maintain a current RN licensure. They are not APN's in MO or ARNP's in KS – the states recognize certification or accreditation from several national bodies as qualifying a nurse to be an APN or ARNP, but this certification is not one of them.

CRNFAs are certified by the Association of Peri-Operative Registered Nurses (AORN) after completing certain educational levels, gaining surgical experience and passing a national exam. AORN does consider the nurse to be an APN/ARNP and refers to them as such on its website. Unless Missouri or Kansas changes to consider CRNFA's as APN's/ARNP's, they will remain ineligible for reimbursement by Blue KC as first surgical assistants.

Certified Nurse, Operating Room (CNOR) is the designation recognizing the nurse who has been certified in perioperative nursing. This certification does not indicate the nurse is an APN/ARNP, therefore a CNOR is not eligible for reimbursement by Blue KC as first surgical assistants. Unless Missouri or Kansas changes to consider CNOR's as APN's/ARNP's, they will remain ineligible for reimbursement by Blue KC as first surgical assistants.

---

### **Documentation Submission**

Documentation must identify and describe the procedures performed. If a denial is appealed, this documentation must be submitted with the appeal.

---

## Coverage

The following applies to all claim submissions; all coding and reimbursement is subject to all terms of the Provider Service Agreement and subject to changes, updates, or other requirements of coding rules and guidelines. All codes are subject to federal HIPAA rules, and in the case of medical code sets (HCPCS, CPT, ICD), only codes valid for the date of service may be submitted or accepted. Reimbursement for all Health Services is subject to current Blue KC Medical Policy criteria, policies found under Provider Payment Policy, Provider Office Guide and all other provisions of the Provider Service Agreement (Agreement). In the event that any new codes are developed during the course of the Provider's Agreement, such new codes will be paid according to the standard or applicable Blue KC fee schedule until such time as a new agreement is reached and supersedes the provider's current agreement. Eligible services will be subject to the subscriber benefits, Blue KC fee schedule amount, and any coding edits.

All payment for codes based on Relative Value Units (RVU) will include a site of service differential and will be calculated using the appropriate facility or non-facility components, based on the site of service identified, as submitted by provider.

---

## Policy History

DATE	DESCRIPTION
	Approval Date
7/1/19	Effective Date