

# MA CRNA laws vs. CMS Billing Rules

## Laws & Regulations For CRNA Practice in MA

VS

## Federal Medicare **Billing Rules** For Anesthesia Provided by CRNAs

### MGL 112 Section 80B

- Practice of Nursing Defined
- Advanced Practice Nursing educational and licensing requirements, standards of care

### MGL 112 Section 80H

- Nurse Anesthetists; Power to Issue prescriptions and order tests and therapeutics
- No requirement to obtain prescriptive authority to administer anesthesia

### Chapter 94C: The Controlled Substance Act and DPH regulations

- Ensures safe handling of controlled substances
- Inconsistent terminology with the Nurse Practice Act
- Requirements for practitioners to register for prescriptive authority

### Board of Registration in Nursing

- Agency authorized to enforce the MGLs associated with nursing
- **Section 244 CMR 4.00:** Regulations for advanced practice nursing

- CMS utilizes a series of billing terms and associated “modifiers” (QZ, QX, QK, QY, AA, etc.) This system provides a means to submit claims to Medicare for reimbursement.
- Requires physician supervision; in this context is not meant to direct the anesthetic; **does not have to be a physician anesthesiologist**
  - **CMS waived this requirement in March 2020 and remains waived as of this writing (12/2021)**
- **If** a physician *anesthesiologist* is the supervisor, billing modifiers are used to determine reimbursement amount, case concurrency, allocation of reimbursement funds
- Often confused and/or **falsely represented** as CRNA practice laws or regulations

- **There are no MA state or Federal laws that require supervision of CRNA practice**
- Hospitals/Facilities may develop their own practice policies that are more restrictive than law.