

Ohio Administrative Code

Rule 5160-4-03 Services provided by a physician assistant.

Effective: January 1, 2022

- (A) Definitions.
- (1) "Physician assistant" has the same meaning as in Chapter 4730. of the Revised Code.
- (2) "Physician" has the same meaning as in section 4730.01 of the Revised Code.
- (3) "Health care facility" has the same meaning as in section 4730.01 of the Revised Code.
- (4) "Service" has the same meaning as in section 4730.01 of the Revised Code.
- (B) Coverage. For a covered service performed by a physician assistant who is currently enrolled as an Ohio medicaid provider, payment may be made only if the physician assistant practices under either of the following arrangements:
- (1) The physician assistant provides services under the supervision, control, and direction of a physician with whom the physician assistant has entered into a supervision agreement under section 4730.19 of the Revised Code; or
- (2) The physician assistant practices in a health care facility and provides services the facility has authorized the physician assistant to perform.
- (C) Payment.
- (1) For assistant-at-surgery services performed by a physician assistant, payment is twenty-five percent of the medicaid maximum for the covered primary surgical procedure.
- (2) For a covered immunization, injection of medication, or provider-administered pharmaceutical, payment is made in accordance with rule 5160-4-12 of the Administrative Code.

- (3) For all other covered services performed by a physician assistant, payment is the lesser of the billing provider's submitted charge or eighty-five per cent of the medicaid maximum.
- (4) Payment for services provided by a hospital-employed physician assistant will be made to the hospital.