



**TO: Physicians, Advanced Practice Registered Nurses, Certified Nurse Midwives,
Nursing Homes and General Hospitals**

RE: Updated Guidance Regarding Shared/Split Medical Visits

The Department of Social Services (DSS) is updating guidance for shared/split medical visits. *This provider bulletin (PB) supersedes the guidance found in [PB 2016-68 - Split/Shared Medical Visits](#) and [PB 2021-09 Additional Guidance Regarding Shared/Split Medical Visits](#).*

For purposes of reimbursement under the Connecticut Medical Assistance Program (CMAP), a shared/split visit is a medical visit in the office, hospital or nursing facility setting that is performed in part by both a physician and a nonphysician practitioner (NPP) who are in the same group or employed by the same employer.

NPPs are defined as physician assistants (PA), advanced practice registered nurses (APRN) and certified nurse midwives (CNM).

NPPs may provide any medically necessary service that is permitted within their scope of practice and performed under the appropriate level of supervision under state law. DSS will follow the guidance specified below and issued by the Centers for Medicare and Medicaid Services (CMS) for billing shared/split visits.

Effective for dates of service June 1, 2022, and forward, the medical visit must be billed based on which practitioner (the physician or the NPP) rendered the substantive portion of the visit. Substantive portion of the visit can be determined based on history, physical exam, Medical Decision Making (MDM), or more than half of the total time for the service (except for critical care services, which must represent more than half of the total time in order to be billed as a shared/split visit).

- Effective for dates of service January 1, 2023, and forward, the visit must be billed based on the practitioner (physician or NPP) who renders the substantive portion of the visit (more than half of the total time spent).
- The reimbursement methodology for NPPs will not be affected by this updated guidance and shared/split visits billed by NPPs will follow the guidance in the following PBs:
 - [PB 2005-45](#) Clarification of Billing Protocols for Nurse Practitioners and Nurse Midwives
 - [PB 2013-40](#) Reimbursement Methodology for Services Rendered by Physician Assistants
 - [PB 2021-49](#) Revising the Reimbursement Methodology for Certified Nurse Midwives and Podiatrists
- Split/shared visits can be performed for established or new patients, and initial and subsequent medical visits.
- Documentation in the medical record must identify the two practitioners who performed the visit. The practitioner who provided the substantive portion of the visit must sign and date the medical record.

Effective for dates of service, June 1, 2022, and forward, modifier **FS** - *Split or shared evaluation management (E/M) visit* will be required on claims to identify a shared/split visit.

Please Note: The use of modifier FS will not affect reimbursement for the shared/split visits.

Effective June 1, 2022, and forward, the medical visit **must** be billed based on which practitioner (the physician or the NPP) rendered the substantive portion of the visit. In addition to the FS modifier, all other applicable modifier(s) used to identify services rendered by CNMs and APRNs must also be listed on the claim.

If you have any questions regarding this bulletin, please contact the Provider Assistance Center at 1-800-842-8440.