

## Non-Physician Care Providers May Order Portable X-Ray Services Under New Medicare Payment Rule

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In a change to long-standing policy, the Centers for Medicare and Medicaid Services (CMS) will soon allow care providers other than physicians to order portable x-ray services with the release on Nov. 1, 2012 of [a final rule](#) setting Medicare Part B payment policies for 2013.

Portable x-ray services are a type of diagnostic imaging service that suppliers in the **Medicare** program most often furnish in residences, such as nursing homes, to avoid expensive ambulance transportation of frail Medicare beneficiaries to a radiology facility or hospital. Under previous Medicare regulations, only doctors of medicine or osteopathy could order portable x-ray services. But under CMS's revisions to these regulations, which will take effect on Jan. 1, 2013, other physicians and non-physician practitioners, such as nurse practitioners and doctors of podiatry, may also order portable x-ray services as long as they are acting within the scope of their Medicare benefit and the scope of their professional authority. In describing its rationale for the change in policy, CMS explained that the proposal "is consistent with our current regulations that generally allow nonphysician practitioners to order diagnostic services, and the agency's interest in having delivery systems take full advantage of all members of a healthcare delivery team."

The loosening of the restrictions on who may order portable x-ray services comes amid increased fraud and abuse scrutiny of portable x-ray suppliers. In a December 2011 [report](#), the Office of the Inspector General (OIG) within the **Department of Health and Human Services** identified what it deemed "questionable billing patterns" among portable x-ray suppliers based on its review of 2009 Medicare claims data. Among its findings, OIG found that Medicare paid at least \$6.6 million for portable x-ray services that were ordered by non-physicians. OIG concluded that such payments "clearly violate Federal regulations and should be recovered" by CMS.

In the final rule, CMS clarified that, despite the change in policy, it will continue to act on OIG's recommendation and recoup payments for services not compliant with previous policy. Beyond the claims OIG identified in its audit, however, CMS indicated that ordering of portable x-ray services will not be a priority for the entities with which CMS contracts to review payments.

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