

(d) Part 493: Laboratory Services.

[51 FR 41339, Nov. 14, 1986, as amended at 57 FR 7134, Feb. 28, 1992; 57 FR 24981, June 12, 1992]

### Subpart B—Medical and Other Health Services

#### § 410.10 Medical and other health services: Included services.

Subject to the conditions and limitations specified in this subpart, “medical and other health services” includes the following services:

- (a) Physicians’ services.
- (b) Services and supplies furnished incident to a physician’s professional services, of kinds that are commonly furnished in physicians’ offices and are commonly either furnished without charge or included in the physicians’ bills.
- (c) Services and supplies, including partial hospitalization services, that are incident to physician services and are furnished to outpatients by or under arrangements made by a hospital or a CAH.
- (d) Diagnostic services furnished to outpatients by or under arrangements made by a hospital or a CAH if the services are services that the hospital or CAH ordinarily furnishes to its outpatients for diagnostic study.
- (e) Diagnostic laboratory and X-ray tests (including diagnostic mammography that meets the conditions for coverage specified in § 410.34(b) of this subpart) and other diagnostic tests.
- (f) X-ray therapy and other radiation therapy services.
- (g) Medical supplies, appliances, and devices.
- (h) Durable medical equipment.
- (i) Ambulance services.
- (j) Rural health clinic services.
- (k) Home dialysis supplies and equipment; on or after July 1, 1991, epoetin (EPO) for home dialysis patients, and, on or after January 1, 1994, for dialysis patients, competent to use the drug; self-care home dialysis support services; and institutional dialysis services and supplies.
  - (l) Pneumococcal vaccinations.
- (m) Outpatient physical therapy and speech pathology services.
- (n) Cardiac pacemakers and pacemaker leads.

(o) Additional services furnished to enrollees of HMOs or CMPs, as described in § 410.58.

- (p) Hepatitis B vaccine.
  - (q) Blood clotting factors for hemophilia patients competent to use these factors without medical or other supervision.
  - (r) Screening mammography services.
  - (s) Federally qualified health center services.
  - (t) Services of a certified registered nurse anesthetist or an anesthesiologist’s assistant.
  - (u) Prescription drugs used in immunosuppressive therapy.
  - (v) Clinical psychologist services and services and supplies furnished as an incident to the services of a clinical psychologist, as provided in § 410.71.
  - (w) Clinical social worker services, as provided in § 410.73.
  - (x) Services of physicians and other practitioners furnished in or at the direction of an IHS or Indian tribal hospital or clinic.
  - (y) Intravenous immune globulin administered in the home for the treatment of primary immune deficiency diseases.
- [51 FR 41339, Nov. 14, 1986, as amended at 52 FR 27765, July 23, 1987; 55 FR 22790, June 4, 1990; 55 FR 53522, Dec. 31, 1990; 56 FR 8841, Mar. 1, 1991; 56 FR 43709, Sept. 4, 1991; 57 FR 24981, June 12, 1992; 57 FR 33896, July 31, 1992; 58 FR 30668, May 26, 1993; 59 FR 26959, May 25, 1994; 59 FR 49833, Sept. 30, 1994; 60 FR 8955, Feb. 16, 1995; 63 FR 20128, Apr. 23, 1998; 66 FR 55328, Nov. 1, 2001; 69 FR 66420, Nov. 15, 2004]
- #### § 410.12 Medical and other health services: Basic conditions and limitations.
- (a) *Basic conditions.* The medical and other health services specified in § 410.10 are covered by Medicare Part B only if they are not excluded under subpart A of part 411 of this chapter, and if they meet the following conditions:
    - (1) *When the services must be furnished.* The services must be furnished while the individual is in a period of entitlement. (The rules on entitlement are set forth in part 406 of this chapter.)
    - (2) *By whom the services must be furnished.* The services must be furnished by a facility or other entity as specified in §§ 410.14 through 410.69.