



## assistant surgeon payment policy

### ***description of procedure/service***

This policy applies to the payment for assistant surgeon services.

### ***policy***

An assistant surgeon is defined as a practitioner who actively assists the operating surgeon in the performance of a surgical procedure. An assistant surgeon must be certified in their specialty. An assistant surgeon may be necessary due to the complex nature of the procedure(s) or the patient's condition. The assistant surgeon performs medical functions under the direct supervision of the operating physician.

Payment is allowed for assistant surgeons when medical necessity and appropriateness of assistant surgeons are met. Fallon Community Health Plan (FCHP), uses nationally recognized or Medicare guidelines to determine medical necessity and appropriateness of assistant surgeon services. Cases may be reviewed on an individual consideration basis. FCHP does not reimburse for assistant surgeons at teaching hospitals unless there is no qualified resident available.

### ***benefits application***

- FCHP Direct Care/FCHP Select Care
- FCHP Independent Care
- FCHP Flex Care Direct/Select
- Fallon Senior Plan™
- FCHP MassHealth
- Major Medical
- Bill at Home/Direct Enrollment
- Fallon Preferred Care
- Fallon Senior Preferred Care

### ***coverage and reimbursement criteria***

The assistant surgeon reimbursement for a covered procedure is the lesser of 16% of the assistant surgeon's contracted rate or billed charges for the procedure, specific contract terms pay apply. The physician assistant reimbursement for a covered procedure is 85% of the maximum allowed for an assistant surgeon. Separate reimbursement will not be allowed for the hospital-employed physician assistant. The nurse practitioner reimbursement for a covered procedure is 85% of the maximum allowed for an assistant surgeon. Assistant surgeon services will not be reimbursed if the medical criteria for the specific procedure are not met, and the member cannot be held liable.

### ***preauthorization guidelines***

Not applicable

### ***billing/coding guidelines***

Payment is allowed for assistant surgeons only when medical necessity and appropriateness of assistant surgeons are met. FCHP follows Medicare guidelines regarding reimbursement for assistant surgeons. If medical necessity and appropriateness criteria are not met, the assistant

surgeon claim will be denied even if the code(s) billed by the assistant surgeon and the surgeon match exactly.

When conditions of medical necessity and appropriateness are met, and the code(s) billed by the assistant surgeon and the surgeon match exactly, both claims will be paid.

When conditions of medical necessity and appropriateness are met, but the code(s) billed do not match exactly, these claims will be processed as follows:

- 1) If the code(s) billed by the assistant surgeon represent anatomically correct area(s), similar level of complexity, and reasonable billed amount(s) to the code(s) billed by the surgeon, they will be processed as acceptable codes.
- 2) If the code(s) billed by the assistant surgeon **do not** represent anatomically correct areas, similar level of complexity, or reasonable billed amount(s) to the code(s) billed by the surgeon, operative notes will be requested from the assistant surgeon for medical review.
  - a) If upon review, it is determined that the code(s) billed by the assistant surgeon are for an incorrect anatomic area(s) or level of complexity, the claim will be re-coded with the appropriate CPT code(s) based on the operative notes. A letter to the assistant surgeon will be generated indicating the discrepancy and the claim will be paid with the correct code(s).
  - b) If the billed amount is not reasonable and customary, Fallon Community Health Plan will contact the assistant surgeon for additional information.

The appropriate modifier should be used:

80 – Assistant Surgeon

81 – Minimum Assistant Surgeon

82 – Assistant Surgeon (when qualified resident surgeon not available)

AS – Physician Assistant/Nurse Practitioner or Clinical Nurse Specialist services for assistant at surgery.

## ***place of service***

This policy applies to services rendered in inpatient and outpatient settings.

## ***policy implementation***

Policy number:	ADM0030
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