

Assistant Surgeon

Scope

This policy applies to:

- | | | |
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| <input checked="" type="checkbox"/> Kaiser Permanente Health Plan of Washington | <input checked="" type="checkbox"/> Kaiser Permanente Health Plan of Washington Options, Inc. | <input type="checkbox"/> Medicaid |
| <input checked="" type="checkbox"/> Commercial | <input checked="" type="checkbox"/> Medicare | |

Policy

Original Effective Date: 08/01/2014

When benefits allow, Kaiser Permanente will reimburse assistant surgeon charges when the procedure code is eligible for assistant surgeon reimbursement per Centers for Medicare & Medicaid Services (CMS) guidelines. Eligible services when billed with modifier 80, 81, or 82 will be reimbursed at 16% of the allowable and when billed with modifier AS will be reimbursed at 13.6% of the allowable. Multiple procedure reductions and additional industry standard modifier reductions may apply.

Billing/Coding Guidelines

All claims must be billed according to CMS guidelines. Practitioner credentials with the appropriate corresponding modifier must be on the claim.

Physician providers billing for assistant surgeon services should use modifier 80, 81, or 82 for both Medicare and commercial plans. Non-physician providers should use modifier AS for both Medicare and commercial plans.

Non-physician providers billing for assistant surgeon services that qualify for reimbursement with modifier AS are...

Medicare Plans	Physician assistant (PA), nurse practitioner (NP), advanced registered nurse practitioner (ARNP), and clinical nurse specialist (CNS)
Commercial Plans	Physician assistant (PA), nurse practitioner (NP), advanced registered nurse practitioner (ARNP), clinical nurse specialist (CNS), registered nurse first assist (RNFA), certified registered nurse first assist (CRNFA), and certified nurse midwife (CNM)

Policy Definitions

Not applicable

Prerequisite(s)

The procedure code must be eligible for assistant surgeon reimbursement per CMS guidelines.

References

[Chapter 12 – Physicians/Non-Physician Practitioners](#), Medicare Claims Processing Manual

[Modifier 80](#), Noridian Healthcare Solutions

[Update To Publication 100-04, Claims Processing Instructions For Chapter 12, Non-Physician Practitioners \(NPPs\)](#), MLN Matters Department of Health and Human Services Centers for Medicare & Medicaid Services

Frequently Asked Questions

- Q1:** A Medicare member had a surgery that qualified for an assistant surgeon per CMS guidelines. The physician was a MD that performed the assistant surgeon duties. The provider coded the same CPT as the surgeon and modifier 80. Will the service be reimbursed?
- A1:** Yes. Kaiser Permanente will reimburse Medicare assistant surgeon fees at 16% of the allowable when billed with modifier 80.
- Q2:** A commercial member had a surgery that qualified for an assistant surgeon per CMS guidelines. The provider was a RNFA that performed the assistant surgeon duties. The provider coded the same CPT as the surgeon and modifier AS. Will the service be reimbursed?
- A2:** Yes. Kaiser Permanente will reimburse commercial assistant surgeon fees at 13.6% of the allowable when billed with modifier AS.
- Q3:** A Medicare member had a surgery that qualified for an assistant surgeon per CMS guidelines. The provider was an ARNP that performed the assistant surgeon duties. The provider coded the same CPT as the surgeon and modifier AS. Will the service be reimbursed?
- A3:** Yes. Kaiser Permanente will reimburse an ARNP for Medicare members when billed with an AS modifier at 13.6%.

Revision History

05/24/2022 – Updated formatting

08/01/2014 – New Policy

Note: This information is intended to serve only as a general reference resource regarding reimbursement policy for the services described and is not intended to address every aspect of a reimbursement situation. Accordingly, we may use reasonable discretion in interpreting and applying this policy to services being delivered in a particular case. Further, the policy does not cover all issues related to reimbursement for services rendered to our enrollees as legislative mandates, the provider contracts, the enrollee's benefit coverage documents, and the Provider Manual all may supplement or in some cases supersede this policy. This policy may be modified from time to time by publishing a new version of the policy on Kaiser Permanente provider website; however, the information presented in this policy is believed to be accurate and current as of the date of publication.