



## COMMERCIAL REIMBURSEMENT POLICY

### Assistant-at-Surgery

Active

**Policy Number:** Surgery/Interventional Procedure – 001  
**Policy Title:** Assistant-at-Surgery  
**Section:** Surgery/Interventional Procedure  
**Effective Date:** 12/01/23

#### Description

This policy addresses the coding and reimbursement of assistant-at-surgery services.

#### Policy Statement

Assistant-at-surgery services are those services rendered by physicians or nonphysician practitioners who actively assist the physician in charge of performing a surgical procedure. Blue Cross and Blue Shield of Minnesota (Blue Cross) determines the services that are eligible for assistant-at-surgery reimbursement based upon the indicator assigned to the applicable procedure code(s) within the Centers for Medicare and Medicaid Services (CMS) National Physician Fee Schedule (NPFSS).

#### Assistant-at-Surgery Indicators:

- 0 = Supporting documentation is required to establish the medical necessity of an assistant-at-surgery. The assistant's specific role in the procedure must be clearly documented and medical records must be submitted as an attachment with the claim.
- 1 = Not eligible for reimbursement
- 2 = Eligible for reimbursement.
- 9 = Concept does not apply; Not eligible for reimbursement

Assistant-at-surgery services must be reported using the same procedure code(s) as the primary surgeon, with the appropriate assistant-at-surgery modifier appended. The National Provider Identifier (NPI) of the assistant must also be reported. Services will be denied as a duplicate charge if the primary surgeon's NPI is reported instead of the assistant's. Only one assistant-at-surgery will be reimbursed for each eligible procedure.

#### Assistant-at-Surgery Modifiers

Physician:

- 80 Assistant surgeon
- 81 Minimum assistant surgeon
- 82 Assistant surgeon (when qualified resident surgeon not available)

Assistant at surgery services performed by physicians are reimbursed at 16 percent of the allowed amount of the procedure.



Non-physician:

AS (Physician assistant, nurse practitioner, or clinical nurse specialist services for assistant at surgery)

Services performed by non-physicians that are subject to a midlevel reduction of 85 percent of allowed, plus the assistant-at-surgery reduction of 16 percent of allowed, will result in reimbursement of 13.6 percent of the allowed amount of the procedure.

Blue Cross considers the services of a surgical technician assisting at surgery to be included in the reimbursement to the facility and not separately reimbursable.

### **Multiple Procedures**

If an assistant-at-surgery submits multiple procedure codes, multiple procedure reductions will apply. Refer to *Commercial Surgery/Interventional Procedure – 005 Multiple Surgery Reduction Reimbursement Policy*.

### **Assistant-at-Surgery and Cesarean Section Delivery**

Refer to *Commercial GC-025 Maternity Reimbursement Policy*.

### **Assistant-at-Surgery and Co-Surgeon Services During the Same Operative Session**

Consistent with CMS, Blue Cross will not reimburse assistant-at-surgery services for procedures where co-surgeon services have been reimbursed using the same surgical procedure code during the same operative session. If a co-surgeon acts as an assistant-at-surgery for other procedure(s) during the same operative session, the additional procedures are eligible for reimbursement when reported with modifier 80 or 82 appended, as appropriate.

## **Documentation Submission**

The documentation/operative report should include the name and credentials of the assistant, and the specific activities that the assistant at surgery performed. The assistant's specific role in the procedure must be clearly documented in the operative report.

## **Coverage**

Eligible services will be subject to the subscriber benefits, applicable fee schedule amount and any coding edits.

### **The following applies to all claim submissions.**

All coding and reimbursement is subject to all terms of the Provider Service Agreement and subject to changes, updates, or other requirements of coding rules and guidelines. All codes are subject to federal HIPAA rules, and in the case of medical code sets (HCPCS, CPT, ICD), only codes valid for the date of service may be submitted or accepted. Reimbursement for all Health Services is subject to current Blue Cross Medical Policy criteria, policies found in the Provider Policy and Procedure Manual sections, Reimbursement Policies and all other provisions of the Provider Service Agreement (Agreement).

In the event that any new codes are developed during the course of Provider's Agreement, such new codes will be paid according to the standard or applicable Blue Cross fee schedule until such time as a new agreement is reached and supersedes the Provider's current Agreement.



All payment for codes based on Relative Value Units (RVU) will include a site of service differential and will be calculated using the appropriate facility or non-facility components, based on the site of service identified, as submitted by Provider.

### Coding

The following codes are included below for informational purposes only and are subject to change without notice. Inclusion or exclusion of a code does not constitute or imply subscriber coverage or provider reimbursement.

**CPT/HCPCS Modifier:** 80            81            82            AS  
**ICD-10 Diagnosis:**        N/A  
**ICD-10 Procedure:**        N/A  
**CPT/HCPCS:**                N/A  
**Revenue Codes:**            N/A

### Resources

Current Procedural Terminology (CPT®)
Healthcare Common Procedure Coding System (HCPCS)
Medicare Claims Processing Manual, Chapter 12 Section 20.4.3
Medicare Physician Fee Schedule (MPFS) Relative Value File
National Government Services (NGS)

### Policy History

12/02/2014	Initial Committee Approval
03/04/2019	Annual Policy Review
01/26/2021	Annual Policy Review
11/29/2021	Revised – Updated format.
05/24/2022	Revised – Removed statement about documentation requirement re: assist at surgery.
04/25/2023	Revised – Updated format and added clarifying information; removed “Assistant-at-Surgery Using Robotics” and created a separate policy, SI-023 Robotic Assisted Surgery.
11/28/2023	Revised

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