Clover

Clover Health Assistant at Surgery Reimbursement Policy   Policy # RP-010

Policy Title	Assistant at Surgery Reimbursement Policy
Policy Department	Payment Strategy and Operations
Effective Date	1/1/2022
Revision Date(s)	1/1/2022
Next Review Date	

Disclaimer:

Clover Health applies The Center for Medicare and Medicaid Services (CMS) criteria and guidelines, National Coverage Determinations (NCD), Local Coverage Determinations (LCD), Clover Policies, and MCG for determining medical necessity. Clover Policies are intended to provide a standard guideline but are not used to preempt providers' judgment in rendering services. Providers are expected to provide care based on best practices and use their medical judgment for appropriate care.

Description:

This reimbursement policy describes the requirements for payment of assistant-at-surgery claims and the payment rates for those services.

Definitions:

- **Assistant-at-Surgery**
  - A physician or non-physician practitioner that supports and assists a surgeon with a surgery or procedure

Policy:

This policy is for the billing of professional claims for surgery services. The Center for Medicare and Medicaid Services (CMS) pays claims for procedure codes with assistant-at-surgery modifiers if the services of an assistant-at-surgery are authorized by CMS. There are some codes that do not allow assistant-at-surgery or have restrictions based on supporting documentation and are not payable.

To determine if a code qualifies for assistant-at surgery payment, the HCPCS code billed must include a CMS payment indicator that qualifies for assistant-at surgery payment. Those indicators are included in the annual CMS Relative Value File and the CMS Physician Fee

Schedule Lookup Tool.
- **0** = Payment restriction for assistants at surgery applies to this procedure unless supporting documentation is submitted to establish medical necessity.
- **1** = Statutory payment restriction for assistants at surgery applies to this procedure. Assistants at surgery may not be paid.
- **2** = Payment restrictions for assistants at surgery don't apply to this procedure. Assistants at surgery may be paid.
- **9** = Concept doesn't apply.

For assistant-at-surgery services performed by physicians, the fee schedule amount equals 16 percent of the amount otherwise applicable for the surgical payment.

Procedures billed with the assistant-at-surgery physician modifiers -80, -81, -82, or the AS modifier for physician assistants, nurse practitioners and clinical nurse specialists, are subject to the assistant-at-surgery policy. Accordingly, Clover Health will pay claims for procedures with these modifiers only if the services of an assistant-at-surgery are approved by CMS as payable.

Clover Health will reimburse Nurse Practitioners (NP) and Clinical Nurse Specialists (CNS) assistant-at-surgery services at 85 percent of the 16 percent that a physician is paid under the Medicare Physician Fee Schedule (13.6%).

If payment is made to a co-surgeon for the same surgery, then assistant-at-surgery claims will not be reimbursed. If the co-surgeon is acting as assistant-at-surgery in addition to co-surgeon, then the provider can bill with a separately billed line and the appropriate modifier to indicate they are billing as assistant-at-surgery.

| **Claim Codes (if applicable)** | Modifiers
● **80 -** Use the 80 modifier when the assistant-at-surgery service was provided by a physician (MD) - reimbursed at 16%
● **81** - Use the 81 modifier to identify minimum surgical assistant services (only submitted with surgery codes) - reimbursed at 16%
● **82** - Use the 82 modifier when the assistant-at-surgery was provided by a physician and there was not a qualified resident available - reimbursed at 16%
● **AS** - Use the AS modifier for assistant-at-surgery provided by a physician assistant (PA), nurse practitioner or clinical nurse specialist, this is only used by a non-physician practitioner - reimbursed at |

	13.6% of the MPFS

References
Medicare Claims Processing Manual, Chapter 12
Physician Fee Schedule CMS Relative Value File
2020 Physician Fee Schedule Guidance