



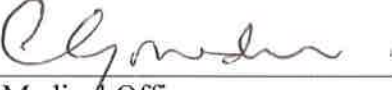
KERN HEALTH SYSTEMS

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POLICY AND PROCEDURES					
SUBJECT: Assistant Surgeon			POLICY #: 6.09-P		
DEPARTMENT: Claims					
Effective Date: 07/1998	Review/Revised Date: <i>06/30/2016</i>	DMHC		PAC	
		DHCS		QI/UM COMMITTEE	
		BOD		FINANCE COMMITTEE	



 Douglas A. Hayward
 Chief Executive Officer

Date 6/30/16



 Chief Medical Officer

Date 7/12/16



 Chief Financial Officer

Date 6/29/16



 Chief Operating Officer

Date 6/20/16



 Administrative Director of Health Services

Date 6/13/16



 Director of Claims

Date 6/6/16

POLICY:

Assistant Surgeons shall be reimbursed for designated surgical procedures identified as requiring an assistant surgeon.

PROCEDURES:

1.0 GUIDELINES FOR DETERMINING ELIGIBILITY OF ASSISTANT SURGEON

Kern Health Systems (KHS) will use the American College of Surgeons (ASC) as its primary source for determining assistant surgeon designations. If the ASC has not designated

assistant surgeon eligibility, or if the designation is “sometimes”, the allowance of an assistant surgeon will be based on the medical necessity requiring an assistant surgeon for the procedure. The KHS Chief Medical Officer or their designee makes this determination based on the documentation provided by the surgeon.

2.0 AUTHORIZATION

Assistant surgeon services are included in surgery authorizations.

3.0 REIMBURSEMENT

The reimbursement allowance for an assistant surgeon is 20% of the KHS allowance for the surgery. The CPT modifier used to identify assistant surgeon claims is -80. However, modifier U7 should be added along with modifier 80 to bill for a Physician Assistant (PA) who serves as first or second assistant in surgery under an approved supervising physician.

REFERENCE:

Revision 2016-06: Minor revision to update CPT modifier. **Revision 2014-09:** Review requested by Compliance Department. Per Policy 14.05-I policies and procedures shall be reviewed every three years at a minimum. **Revision 2008-01:** Routine revision. **Revision 2004-08:** Routine revision.