Multiple Surgeons



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Description

The use of multiple surgeons for a single procedure may be used when the nature and/or complexity of the procedure necessitates contribution and expertise from more than one surgeon. Oscar provides coverage for multiple surgeons based on guidance from the Centers for Medicare and Medicaid Services (CMS).

When more than one surgeon performs a procedure, it is not sufficient to solely list the additional surgeon's name(s) in the heading of the operative report. The operative note should clearly document how the additional surgeon contributed to the procedure. Additionally, documentation should clearly support the need for the assistant, including any prerequisites, to support modifiers used.

Assistant Surgeon - A physician who actively assists the operating surgeon.

Assistant-at-Surgery - A physician assistant, nurse practitioner, nurse midwife, or operating room technician acting under the direct supervision of a physician, where the physician acts as the surgeon and the assistant-at-surgery as an assistant.

Co-Surgeon - Two or more surgeons, where the skills of both surgeons are necessary to perform distinct parts of a specific operative procedure.

Team Surgeon - A physician who operates along with other physicians, often of different specialties, plus other highly skilled, specially trained personnel, and complex equipment to perform intricate surgeries.

<u>Policy</u>

Oscar follows criteria based on the CMS National Physician Fee Schedule Relative Value File (NPFS) status indicators:

- All codes in the NPFS with the status code indicator "2" for "Assistant Surgeons" are considered by Oscar to be reimbursable for Assistant Surgeon services, as indicated by an Assistant Surgeon modifier (80, 81, 82, or AS).
- All codes in the NPFS with status code indicators "1" or "2" for "Co-Surgeons" are considered by Oscar to be eligible for Co-Surgeon services as indicated by the co-surgeon modifier 62.
- All codes in the NPFS with the status code indicators "1" or "2" for "Team Surgeons" are considered by Oscar to be eligible for Team Surgeon services as indicated by the team surgeon modifier 66.

There may be times when a physician elects to utilize more than one assistant during the operative session. However, only one assistant surgeon per operative session will be reimbursed.

Reimbursement Guidelines

Assistant Surgeons

Consistent with CMS guidelines, Oscar's standard reimbursement for qualified Assistant Surgeon services are 16% of the primary surgeon's allowable amount when performed by a physician and 14% of the primary surgeon's allowable amount when performed by a non-Physician (as defined above).

An assistant surgeon is distinguished from an "assistant-at-surgery." Generally, the assistants-in-surgery services are included in the primary surgeon's, or the facility's, reimbursement. Therefore, assistant-in-surgeon services are not separately reimbursed.



Co-Surgeons

Consistent with CMS guidelines, Oscar will reimburse co-surgeon services at 62.5% of the allowable amount to each surgeon subject to additional multiple procedure reductions if applicable. The allowable amount is determined independently for each surgeon and is the amount that would be given to that surgeon performing the surgery without a co-surgeon.

Team Surgeons

Each Team Surgeon should submit written medical documentation describing the specific surgeon's involvement in the total procedure. Oscar will review each submission with its appropriate medical documentation and will make reimbursement decisions on a case-by-case basis.

Coding

Use of modifiers is required for proper payment. Each surgeon should submit identical procedure code(s) as the primary surgeon with one of the following modifiers to represent their service(s):

Assistant Surgeon Modifiers

Modifier	Description	Type of Professional
80	Assistant Surgeon	Physician
81	Minimum Assistant Surgeon	Physician
82	Assistant Surgeon (when qualified resident surgeon not available)	Physician
AS	PA (physician assistant), nurse practitioner, or clinical nurse specialist services for assistant at surgery	non-Physician*

^{*} Health care professionals acting as Assistant Surgeons should report their services under a surgeon's provider number.

Co-Surgeon & Team Surgeon Modifiers

Modifier	Description	Type of Professional
62	Two Surgeons	Physician *
66	Team Surgeons	Physician

^{*} Physicians acting in the more limited capacity of an 'Assistant Surgeon' should bill with modifiers 80 or 82 and are not eligible for Co-Surgeon reimbursement.

Related Policies

Modifier Guidelines Multiple Procedures

References

1. CMS, Medicare Claims Processing Manual, Pub. No. 100-04, Chapter 12

Publication History

Date	Action/Description
09/01/2015	Original Documentation
10/05/2015	Initial Policy Approval
04/20/2017	Policy Updated
01/30/2025	Policy Updated; Policy renamed from Assistant Surgeons to Multiple Surgeons; Merged Assistant Surgeon and Co-Surgeons/Team Surgeons Policies; Template updated; Added



Description section; Added Reimbursement Guidelines section; Added Related Policies section; Added References section; No change to policy intent