

## ASSISTANT SURGEONS

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### I. CPT<sup>1</sup> PROCEDURE CODES

10040 - 69990, 92982, 92984, 92995, 92996, 92998

### II. APPLICABILITY

This policy is mandatory for reimbursement of services provided by either network or non-network providers. However, alternative network reimbursement methodologies are permitted when approved by TMA and specifically included in the network provider agreement.

### III. ISSUE

How are assistant surgeons to be reimbursed?

### IV. BACKGROUND

An assistant surgeon is a physician, dentist, podiatrist, certified physician assistant, **nurse practitioner**, or certified **nurse** midwife acting within the scope of their license, who actively assists the operating surgeon in the performance of a covered surgical service. Refer to [Chapter 1, Section 6](#) for information regarding reimbursement of certified physician assistants, **and nurse practitioners** performing as assistant surgeons.

### V. POLICY

A. Services of an assistant surgeon are payable when:

1. The surgical procedure is of such complexity and seriousness as to warrant an assistant surgeon. The assistant surgeon's services must be of the type that cannot be accomplished by operating room nurses or other such operating room personnel.

2. Interns, residents or other hospital staff are not available to provide the surgical assistance.

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B. The allowable charge for an assistant surgeon (where such services are covered) is to be the lower of the billed charge or 16 percent of the prevailing charge for the surgery involved. When an assistant surgeon is involved in multiple surgery, the same procedures used for determining reimbursement for the primary surgeon shall be used in determining reimbursement for the assistant surgeon.

#### VI. EFFECTIVE DATE

The 16 percent reimbursement methodology is effective for assistant surgeon services provided on or after November 1, 1993.

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