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**CHAPTER 5: PROFESSIONAL SERVICES**

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**Assistant Surgeon/Assistant at Surgery**

Louisiana Medicaid will reimburse for **only one** assistant at surgery. The assistant to the surgeon should be a qualified physician. However, in those situations when a physician does not serve as the assistant, qualified, enrolled, advanced practice registered nurses and physician assistants may function in the role of an assistant at surgery and submit claims for their services under their Medicaid provider number.

Physicians serving as the assistant are to use the modifier “80” on the procedure code(s) representing their services.

Advanced practice registered nurses, certified nurse midwives, and physician assistants are to use the modifier “AS” when reporting their services as the only assistant at surgery.

**NOTE:** Refer to “Modifiers” for additional information on these modifiers.

The reimbursement of claims for more than one assistant at surgery is subject to recoupment.

**ClaimCheck**

With the implementation of ClaimCheck, Louisiana Medicaid recognizes the American College of Surgeons (ACS) as its primary source for determining assistant surgeon designations. This rationale is based on the ACS determination of these designations using clinical necessity guidelines.

ClaimCheck performs a procedure code-to-modifier validity check to determine if a procedure code is valid with an 80/AS modifier.

When ClaimCheck identifies a specific procedure code that does not require an assistant surgeon, the provider will receive the following explanation of benefits message:

“558 – Assistant Surgeon invalid for this procedure/ClaimCheck”

**NOTE:** See Appendix A for information on where to obtain a list of procedure codes reimbursable with the 80/AS modifiers.