

Modifier Coding Alert

Reader Question: Get to the Details When Using Modifier 80

Question: What modifier would I use if two of my physicians, a primary surgeon and an assistant surgeon, performed multiple procedures assisting each other?

Indiana Subscriber

Answer: The answer depends on several factors, such as are your two surgeons performing separate procedures? If yes, you would code each physician's procedure separately, without any modifiers.

If your two surgeons perform three procedures where they assist each other on only one of the procedures, you would code two of the procedures separately, one for each physician. If the primary surgeon with the other surgeon assisting performs the third procedure, you would attach modifier 80 (Assistant surgeon) or 82 (Assistant surgeon [when qualified resident surgeon not available]).

When two surgeons perform a procedure with two different areas of expertise, such as spinal surgery and heart surgery, you would report the same CPT® code for the two surgeons for a reimbursement of 62.5 percent of the fee schedule amount using modifier 62.

If the assistant surgeon is an attending and you are at a teaching facility, you would use modifier 82 and a statement that "no qualified resident was available" should be added to the note. CMS suggests that you attach the following disclaimer (found online at www.cms.gov/transmittals/downloads/r1780b3.pdf) to the note as well:

"I understand that section 1842(b)(7)(D) of the Social Security Act generally prohibits Medicare physician fee schedule payment for the services of assistants at surgery in teaching hospitals when qualified residents are available to furnish such services. I certify that the services for which payment is claimed were medically necessary and that no qualified resident was available to perform the services. I further understand that these services are subject to post-payment review by the Medicare carrier."

If there is one primary surgeon and one assisting surgeon along with a qualified resident, the other surgeon's (the assisting surgeon) services would not be billable. If the resident was not qualified, your physician needs to illustrate that clearly in the documentation. The disclaimer could be added with the reason why the resident may not have been qualified (new, difficult procedure, observing only, etc.)