

CHAMPVA POLICY MANUAL

CHAPTER: 2
SECTION: 29.2
TITLE: ASSISTANT SURGEONS

AUTHORITY: 38 CFR 17.270(a) and 17.272(a)(b)

RELATED AUTHORITY: 32 CFR 199.4(c)(2)

I. EFFECTIVE DATE

April 5, 1989

II. PROCEDURE CODE(S)

10040-69990, 92982, 92984, 92995-92998

III. DESCRIPTION

An assistant surgeon is a physician, dentist, podiatrist, certified physician assistant, **certified nurse practitioners**, 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.

IV. POLICY

A. CHAMPVA benefits are allowed only when the assistant surgeon is considered medically necessary.

B. All assistant surgeon claims are subject to medical review to ascertain medical necessity. Questionable cases should be submitted for medical review.

C. Services of an assistant surgeon are considered medically necessary when:

1. the surgical procedure is of the complexity and seriousness as to warrant a surgical assistant (other than the surgical nurse or other such operating room personnel), or

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

Note: The operating surgeon must certify in writing to the nonavailability of a qualified intern, resident or other hospital physician.

D. Review is also required to determine medical necessity when:

1. the surgery was performed by a team of surgeons and/or if multiple assistant surgeons were involved, or
2. the assistant surgeon is in partnership or practice with the primary surgeon.

V. POLICY CONSIDERATIONS

A. A coexisting illness, condition or other complicating situation may necessitate the service of an assistant surgeon for a procedure that is generally not considered complex or serious enough to warrant an assistant. Such claims must be reviewed on a case by case (individual) basis in order to determine medical necessity.

B. Hospital requisites and/or the operating surgeon's personal opinion do not necessarily constitute or indicate medical necessity.

C. If the assistant surgeon's services are of the type that can be accomplished by operating room personnel, the services of an assistant surgeon would not be payable.

D. The medical necessity of an assistant surgeon for any procedure should be determined using the above criteria.

VI. EXCEPTIONS

When an assistant surgeon assists in a percutaneous transluminal coronary angioplasty (PTCA), benefits may be allowed when the criteria under Policy C 1 and 2 have been met.

VII. EXCLUSIONS

A. Regardless of the complexity or seriousness of the procedure, benefits are not allowed for standby assistant surgeons who do not provide an active service (see [Chapter 2, Section 13.10](#), *Standby Charges*).

B. Registered nurse first assistant (RNFA) as a surgical assistant.

END OF POLICY