

Medicare Denials of 1<sup>st</sup> Assistant Fees in Certain Orthopedic Cases

<b>PT/H PCS</b>	<b>Description</b>	<b>Medicare's 1<sup>st</sup> Assist Coverage Policy</b>
9806	Arthroscopy, shoulder, surgical; capsulorrhaphy	Not payable
9807	Arthroscopy, shoulder, surgical; repair of SLAP lesions	Not payable

If you have experienced a denial of claims for surgical assist services on the following procedures please appeal denials for claims on these services and inform your state

chapter leaders of this problem and need to appeal. For Medicare, follow the appeals process in the attached document (MedicareAppealsprocess.pdf). Please note, Medicare appeals consider little more than paperwork until the 3<sup>rd</sup> level of appeal where the medical necessity of the service may be evaluated. Nevertheless, it is crucial that information regarding the medical necessity of the service is appended to the appeal by the 2<sup>nd</sup> level.

Denials are expected because these procedures are on Medicare's surgical assist exclusion list.

However, The American College of Surgeon's *Physicians as Assistants at Surgery: 2007 Study* ranks both of these procedures as Almost Always needing a first assistant. Therefore, it is **the AAPA's belief** that it is appropriate for Medicare to change its policy regarding these procedures and pay a medically necessary first assistant.