

-Information/Non-English-Resources.aspx). Information is currently available in English, French, Japanese, Chinese, Korean, Farsi, and Punjabi. For more dementia resources in other languages, visit the Alzheimer's Disease International website (<http://www.alz.co.uk/>).

—**Lauri McCoy MD, CFPC, Geriatrics**

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Submitting claims for a certified surgical assistant

Fee codes T70019, T70020

Claims for certified surgical assistants are billed under the following fee codes:

T70019: Certified surgical assistant (where it is necessary for one certified surgeon to assist another certified surgeon, an explanation of the need is required except for procedures prefixed by the letter "C") – for up to 1 hour. Note: Time is calculated at the earliest, from the time of physician/patient contact in the operating suite.

T70020: Time after 1 hour of continuous certified surgical assistance for one patient, up to and including 3 hours of continuous surgical assistance for one patient – each 15 minutes or fraction thereof.

Notes: i) After 3 hours of continuous surgical assistance for one patient, bill under fee item 00198 (time after 3 hours of continuous surgical assistance for one patient, each 15 minutes or fraction thereof).

ii) Please indicate start and end time of service on claim.

In order to meet the criteria to bill a certified surgical assist:

- A detailed explanation needs to be provided in the operative report or a separate letter sent to MSP by the

primary surgeon. Reports and letters can also be faxed to MSP at 250 405-3593.

- The letter by the surgeon to MSP should include the following: Name, PHN, DOB, DOS, procedure(s) performed (include fee code) and should describe the complexity of the procedure, such as comorbidities, obesity, and other factors that require a certified assist versus a regular assist.
- It is recommended that you note the start and end times in your operative report in the event you are audited.

If you simply state "A certified assist was required" or "a medical necessity" with no explanation as to the complexity of the procedure, the certified surgical assistant fee could be reduced to a surgical assist fee (fee items 00195, 00196, or 00197).

Any fee item with an "S" prefix is deemed not to require an assistant, and claims submitted for an assistant on these fee items will not be paid.

Always refer to the *Doctors of BC Guide to Fees* and its Preamble for interpretations of all fees.

—**Keith J. White, MD**
Chair, Patterns of Practice Committee

This article is the opinion of the Patterns of Practice Committee and has not been peer reviewed by the BCMJ Editorial Board. For further information contact Juanita Grant, audit and billing advisor, Physician and External Affairs, at 604 638-2829 or jgrant@doctorsofbc.ca.

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