



Colorado Medicaid Program Billing

ASSISTANT SURGEON REPORT

ASSIST next to the procedure code in the current Dental ADA Codes bulletin indicates an assistant surgeon is allowed. The procedures for which an assistant surgeon is allowed are different for children, adults and non-citizen clients. Please refer to the appropriate section of the bulletin before providing these services.

- Prior authorization review (PAR) is **not** required for the assistant surgeon.
- Assistant surgeon claim must be submitted on a paper 2006 ADA claim form.
- Bill one D7999 "unspecified oral surgery procedure, by report", and enter your total charge for assisting with the surgery/surgeries.
- In the "Remarks" area, write "assistant surgery".
- Please do not send x-rays

Copy this page, complete the Assistant Surgeon Report, and attach it to your paper claim form.

If enrolled in Medicaid as a dentist rather than physician, CPT medical and surgical codes cannot be used.

Assistant Surgeon Report

Report date _____

Assistant surgeon name _____

Provider Medicaid Program number _____ Provider NPI _____

Primary surgeon name _____

Provider Medicaid Program number _____ Provider NPI _____

Medicaid Program Client name _____ Client Medicaid ID number _____

Claim date of service _____

List the ADA procedure codes provided by the primary surgeon, for which you were the assistant surgeon.

Attach this form to completed ADA claim form as described above.

PLEASE COPY THIS BLANK FORM AS NEEDED