

Robotic Assisted Surgery

Last Updated: 2/12/2025

Last Reviewed: 2/12/2025

Originally Effective: 4/7/2008

Last update includes payment policy changes, subject to 28 TAC §3.3703(a)(20)(D)? No

If yes, Texas Last Update Effective Date: n/a

Policy #: RPM006

Scope

Companies: Moda Partners, Inc. and its subsidiaries & affiliates (All)

Provider Contract Status: Any

Claim Forms: CMS1500 & CMS1450 (paper and electronic versions)

Claim Dates: All

Reimbursement Guidelines

A. General Policy Statement

No additional reimbursement is provided based upon the type of instruments, technique or approach used in a procedure. Such matters are left to the discretion of the surgeon. No additional professional or technical (facility) reimbursement will be made when a surgical procedure is performed using robotic assistance or robotic surgical devices (including but not limited to the da Vinci® Surgical System or the ZEUS™ Robotic Surgical System).

B. Reimbursement Adjustments

1. Reimbursement for procedures in which a robotic surgical system is used will be based on the contracted rate or maximum plan allowance (MPA) for the base procedure.
 - a. Separate reimbursement is not allowed for the robotic surgical technique, whether reported under add-on code S2900, an unlisted procedure code, or another code. The line item will be denied entirely.
 - b. If the surgical procedure itself is reported with an unlisted code due to the use of a robotic surgical system, the unlisted code will be manually priced based on the contracted fee or MPA for the listed procedure code for the base surgical procedure.
 - c. Additional reimbursement will not be approved for use of modifier 22.
 - d. Separate reimbursement is not allowed for the robotic surgical device as a “surgical assistant” or an “assistant surgeon” with modifier -80, -81, -82, or –AS.
 - e. When facility surgical charges are identified as excessive as compared with charges for the equivalent non-robotic surgeries, a 50% reduction is applied to the time-based anesthesia and operative charges. This is in addition to the denial of any line item that is specific to the robotic surgical technique (e.g., S2900, etc.).
2. No additional reimbursement is provided to hospitals, surgery centers and facilities for the use of a robotic surgical device or other specialized operating room equipment. These items are a capital equipment expense for the facility and are not separately billable to the insurance carrier. Reimbursement for the use of such equipment is included in the Operating Room charges under revenue code 0360 or the facility fee for the base surgical procedure for ASC claims. Supplies related to the use of the robot are also disallowed.
 - a. Example A:
A provider performs a laparoscopic prostatectomy with robotic assistance. The physician bills for the services 55866 (laparoscopy, surgical prostatectomy, retropubic radical, including nerve sparing), with the add-on code S2900 (indicating robotic assistance). Payment will be made only for the base procedure 55866.

b. Example B:

A provider performs a laparoscopic prostatectomy with robotic assistance. The physician bills for the services using 55899 (unlisted procedure, male genital system). The description supplied for the unlisted code is laparoscopic radical retropubic prostatectomy, using da Vinci surgical system. 55899 will be manually priced based on the allowance for listed base procedure 55866.

Definitions

Acronyms/Abbreviations

Acronym	Definition
AMA	American Medical Association
ASC	Ambulatory Surgery Center
CCI	Correct Coding Initiative (see "NCCI")
CMS	Centers for Medicare and Medicaid Services
CPT	Current Procedural Terminology
DRG	Diagnosis Related Group (also known as/see also MS DRG)
HCPCS	Healthcare Common Procedure Coding System (acronym often pronounced as "hick picks")
HIPAA	Health Insurance Portability and Accountability Act
MPA	Maximum Plan Allowance, Maximum Plan Allowable
MS DRG	Medicare Severity Diagnosis Related Group (also known as/see also DRG)
MUE	Medically Unlikely Edits
NCCI	National Correct Coding Initiative (aka "CCI")
PTP	Procedure-To-Procedure (a type of CCI edit)
RPM	Reimbursement Policy Manual (e.g., in context of "RPM052" policy number, etc.)
UB	Uniform Bill

Definition of Terms

Term	Definition
Maximum Plan Allowable	<p>The maximum amount that we will reimburse providers.</p> <p>For a participating provider, the maximum amount is the contracted fee.</p> <p>For an out-of-network provider, the maximum amount is the lesser of any supplemental provider fee arrangements We may have in place and other pricing calculation sources which vary depending upon the type of billing provider.</p>

Procedure codes (CPT & HCPCS) (Not separately reimbursable)

Code	Code Description
S2900	Surgical techniques requiring use of robotic surgical system (list separately in addition to code for primary procedure).

Related Policies

- ["Moda Health Reimbursement Policy Overview."](#) Moda Health Reimbursement Policy Manual, RPM001.
- ["Modifier 22 – Increased Procedural Services"](#), Moda Health Reimbursement Policy number RPM 007.
- ["Modifiers 80, 81, 82, and AS - Assistant At Surgery."](#) Moda Health Reimbursement Policy Manual, RPM013.

Resources

1. *Robotic Assisted Surgery, Updated Final Evidence Report*. Center for Evidence-based Policy, Oregon Health & Science University. May 3, 2012. 20 December 2012, http://www.hta.hca.wa.gov/documents/ras_corrected_final_report_050312.pdf .
2. Mamula, Kris B. *Study: Robot-assisted Surgery Costs More*. Pittsburgh Business Times, May 23, 2012. 20 December 2012, <http://www.bizjournals.com/pittsburgh/news/2012/05/23/robot-assisted-surgery-costs-higher.html?page=all> .
3. Kilgore, Christine. *Robotic Hysterectomy Takes Off, Causing Concern*. OB.Gyn.News. December 1, 2011. 20 December 2012, [http://www.obgynnews.com/index.php?id=11146&cHash=071010&tx_ttnews\[tt_news\]=119904](http://www.obgynnews.com/index.php?id=11146&cHash=071010&tx_ttnews[tt_news]=119904) .
4. Oregon Health Authority (OHA). “Guideline Note 172, Interventions With Marginal Clinical Benefit Or Low Cost-Effectiveness For Certain Conditions – Rationale HCPCS S2900 Surgical techniques requiring use of robotic surgical system.” Oregon Health Authority Health Evidence Review Commission. Last updated January 4, 2022. Last accessed February 28, 2022. Landing page: <https://www.oregon.gov/oha/HPA/DSI-HERC/SearchablePLdocuments//Prioritized-List-GN-172.docx> . Rationale HCPCS S2900: <https://www.oregon.gov/oha/HPA/DSI-HERC/SearchablePLdocuments/GL-172-Robotic-Assist-S2900.docx> .

Policy History

Reminder: The most current version of our reimbursement policies can be found on our provider website. If you are using a printed or saved electronic version of this policy, please verify the current information by going to: https://www.modahealth.com/medical/policies_reimburse.shtml

Date	Summary of Update
2/12/2025	Related Policies updated. Formatting updates. No policy changes.
2/14/2024	Last reviewed date updated. No other changes.
10/12/2022	Formatting updates. Policy History entries prior to 2022 omitted (in archive storage). No policy changes.
7/6/2011	Policy document initially approved by the Reimbursement Administrative Policy Review Committee & initial publication.
4/7/2008	Original Effective Date (with or without formal documentation). Policy based on OHA ⁴ and our Administrative decision.