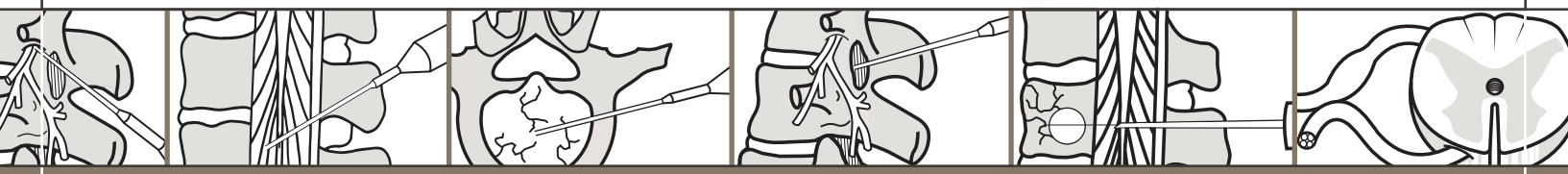
ZHealth PUBLISHING

Dr. Z's Medical Coding Series

Pain Management Coding Reference



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2024
Eighth Edition

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Nervous System Anatomy and Physiology

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The nervous system consists of the brain, spinal cord, sensory organs, and all of the nerves that connect these organs with the rest of the body. Together, these organs are responsible for the control of the body and communication among its parts. The brain and spinal cord make up the central nervous system, which controls the actions of all cranial and peripheral nerves. The peripheral nervous system includes somatic (sensory and motor) and autonomic nerves.

The nervous system has three main functions: sensory, integration, and motor. The sensory system of nerves carries information back to the central nervous system from remote sites when stimulated by internal and external occurrences. For example, when a toe is stubbed, a signal is sent to the brain that an injury has occurred. The integration function of the nervous system is the processing of the stimuli received and determination of the reaction. The motor function is the process of the central nervous system sending a signal to the remote site of how to react. This signal determines the response. It could be as simple as sending a pain signal resulting in verbally saying "ouch" to a more severe pain signal resulting in not being able to walk on that foot.

CENTRAL NERVOUS SYSTEM

The central nervous system (CNS) consists of the brain and spinal cord. The brain controls bodily functions, including awareness, movements, sensations, thoughts, speech, and memory. The spinal cord can control reflex movements without the brain's involvement, but the brain controls most functions.

The spinal cord is the continuation of the brainstem distally. Cranial nerves exit the brain through the brainstem, while peripheral nerves exit the spinal cord bilaterally as nerve roots to carry signals back and forth between the brain and the periphery.

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Nerve Blocks Above the Diaphragm

PROCEDURE:

An intercostal nerve block is an injection of a steroid or other medication around the intercostal nerves that are located under each rib.

CODES:

PROCEDURE DESCRIPTION	PROC CODE	APC	WORK RVU
Injection(s), anesthetic agent(s) and/or steroid; intercostal nerve, single level	64420	5442	1.08
Injection(s), anesthetic agent(s) and/or steroid; intercostal nerve, each additional level (List separately in addition to code for primary procedure)	✰64421	5443	0.50
Unlisted procedure, nervous system	64999	5441	0.00

✰Add-on Code

CODING INSTRUCTIONS:

1. Report code 64420 for an initial or single injection of an intercostal nerve.
2. Report code 64421 for each additional level injected.
3. If a single injection blocks several nerves, it is still reported as a single injection with code 64420.
4. While rare, if a single needle is placed and manipulated to different sites for injection, the additional intercostal nerves treated are reported with code 64421.
5. The bilateral concept applies to codes 64420 and 64421. Append -50, -RT or -LT modifier to the initial code when intercostal nerves are injected bilaterally on each side. CMS guidelines state that modifier -50 should <u>not</u> be appended to add-on codes. Consult local payer guidelines when billing add-on codes bilaterally.
6. Report unlisted code 64999 for injection of painful scar tissue following mastectomy.

EXAMPLE(S):

1) Patient with intercostal neuralgia due to fractured ribs on the right side. The patient is transferred to the procedure room and placed in the prone position, then sterilely prepped with alcohol followed by ChloraPrep. Sterile towels are used for draping. Under fluoroscopic guidance (77002), three levels of ribs are identified on the right side (ribs #9, #10, and #11). Lidocaine 1% is used for infiltration of skin and subcutaneous tissue above each one of the three rib levels on the right side, and then a 22 gauge 3.5 inch spinal needle is advanced approximately 1 inch from the midline in a manner where the tip of the needle would be directed to the infracostal groove under fluoroscopic guidance. Aspiration is negative for CSF, negative for blood, and negative for air. Contrast is then injected with great spread of the dye in the the infracostal groove. Aspiration is still negative for CFS and blood. 3 mL of solution is injected per each level; total amount is 60 mg Depo-Medrol and 10 mL

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0.5% Marcaine (64420-RT, 64421-RT x 2).

REFERENCES:

Centers for Medicare and Medicaid Services, Medically Unlikely Edits (MUEs)

CPT Assistant, Sep 10:10, Nov 10:9, Jun 15:3, Dec 22:12&21, Jan 23:31

CPT Changes: An Insider's View 2020

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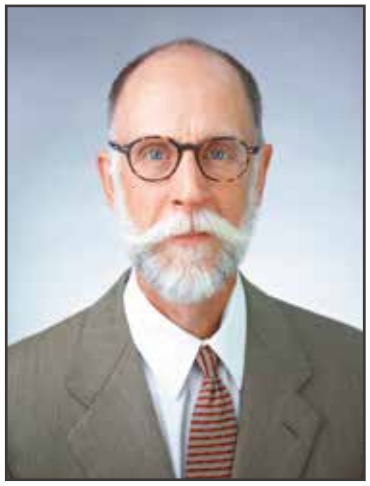

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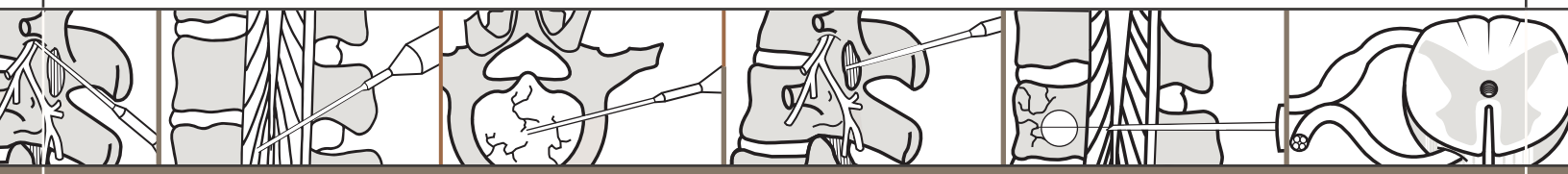

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