

Part B Insider (Multispecialty) Coding Alert

Incontinence: How to Bill for Sacral Nerve Stimulation

Sacral stimulation needs different codes than spinal neurostimulation

Sacral nerve stimulation is very similar to spinal neurostimulator implantation, except that the former is to control incontinence and the latter is to manage pain. But the coding for these devices is somewhat different.

According to coder **Donna Cardarelli** with Urology Associates of Essex North in Haverhill, Mass., sacral nerve stimulation has the following three stages:

Stage one: A minimally invasive test stimulation. It can last up to several days, letting patients try out the neurostimulator and see whether it helps control incontinent episodes. They keep a diary of their "voiding behavior" for several days. Use [CPT 64581](#) (Sacral nerve implantation) and 76000 (Fluoroscopy, up to one hour), and if implantation is bilateral, use the -RT and -LT modifiers.

Stage two: If the test is successful, then the permanent implantation takes place. The physician makes an incision over the foramen, dissects the exposed area, tests it during the operation and replaces the test needle. The physician creates a neurostimulator pocket to place the permanent lead into. Use CPT code 64590 (Incision and subcutaneous placement of peripheral neurostimulator pulse generator or receiver) with modifier -58 (Staged or related procedure or service by the same physician during the postoperative period) and 64585 (Revision or removal of peripheral neurostimulator electrodes) with modifier -78 (Return to the operating room for a related procedure during the postoperative period). If the physician programs the device at this point, use 95972 (Electronic analysis ...; complex brain, spinal cord, or peripheral neurostimulator pulse generator/transmitter, with intraoperative or subsequent programming).

Stage three: If the programming happens later, it may occur during a physician office visit. Some patients may need programming more than once. Cardarelli says she always bills 95972 for programming and never has to add a modifier to it even for repeated occasions. On occasion, some carriers have claimed 95972 is included in another service, but they'll pay it with a modifier.

Other experts advise using 64561 (Percutaneous implantation of neurostimulator electrodes; sacral nerve [transforaminal placement]) for the test and 64581 (Implantation of neurostimulator electrodes; sacral nerve) for the final implantation. These codes were introduced in 2002, and many coders saw them as intended for these two phases of sacral nerve stimulation.

Many insurers require preauthorization for sacral nerve stimulators, Cardarelli says, so she sends a letter explaining the device and why it's needed. For coverage for sacral nerve stimulation, you must use the correct diagnosis codes. Medicare and other payers won't usually cover the devices for 625.6 (Stress urinary incontinence).