

Eli's Rehab Report

Part B Questions & Answers

The following Q&As have been provided by **Rick Gawenda, PT**, president of Gawenda Seminars & Consulting Inc.

Question: What code should I bill home TENS unit instructions under?

Answer: There are 2 possible codes that could be used. The first is CPT® code 97032 (electrical stimulation, manual, each 15 minutes). This is the most common code to use as the vast majority of insurance carriers reimburse for this code under an occupational or physical therapy plan of care.

The second option is CPT® code 64550 (Application of a TENS unit). This code is not recognized by all insurance carriers if billed under an occupational or physical therapy plan of care. CPT® code 64550 is also a service-based CPT® code and can only be billed as 1 unit regardless of the amount of time spent providing the home TENS unit instruction.

Question: What would be included in a TENS unit instruction for home use?

Answer: Services that would be included in a TENS unit instruction would be teaching the patient how and where to place the electrodes on their body, how to connect the lead wires to the electrodes, how to turn the TENS unit on and off, the wearing schedule of the TENS unit, and teaching the patient how to inspect their skin for adverse reactions to the TENS unit.

Question: If an insurance company does not reimburse for iontophoresis (CPT® code 97033), can I bill for iontophoresis under manual electrical stimulation (CPT® code 97032)?

Answer: The simple answer is no. Providers must always choose the CPT® code that best describes the service they provided. There is no better CPT® code to describe iontophoresis than CPT® code 97033. To bill iontophoresis under another CPT® code, unless instructed to do so by an insurance carrier, could be considered fraudulent billing.