

Eli's Rehab Report

Reader Question: Injecting Synvisc

Question: When we give a patient a Synvisc injection, should we bill for an E/M along with the injection, or just the injection and the drug?

Arizona Subscriber

Answer: The physiatrist normally schedules the patient for a Synvisc injection, and the patient presents just for that reason (not for an E/M visit). You would bill 20610* (Arthrocentesis, aspiration and/or injection; major joint or bursa [e.g., shoulder, hip, knee joint, subacromial bursa]) and the code for the drug injected (J7320, Hylan G-F 20, 16 mg, for intra-articular injection).

However, if a separate service (unrelated to the Synvisc injection) was rendered during the visit, you could code for an E/M visit separately with modifier -25 (Significant, separately identifiable evaluation and management service by the same physician on the same day of the procedure or other service) appended to the E/M code. For instance, a patient presents for her Synvisc injection, but the physiatrist notices that she is limping and examines her foot. The physiatrist discovers that she is suffering from a skin infection in her left heel, treats the infection and prescribes antibiotics. The physiatrist would code for the Synvisc injection using 20610* and J7320 and bill the E/M using the 99211-99215 range with modifier -25 appended.

Note: Patients frequently must be precertified to receive Synvisc injections. Check with your local carrier before administering these injections for your arthritic patients.