

Eli's Rehab Report

Reader Question: Note Injection Substance to Select Code

Question: How do facet joint injections (64470-64476) differ from epidural blocks (62280-62282)?

Mississippi Subscriber

Answer: Facet joint injections and epidural blocks differ in several respects, but the principal differences involve the substance that the physician injects and the duration of the injection's effects.

Codes 64470-64476, as well as the term "facet joint injection," describe two distinct but related procedures. During the first type of injection, sometimes referred to as an intra-articular block, the physician injects anesthetic and/or steroid to denervate the paravertebral facet joint (the bony surface between vertebrae). In the second procedure, the physician targets the facet joint nerve, called the median branch nerve.

Such injections can be therapeutic but are usually diagnostic. As a diagnostic tool, the physiatrist uses the injections to document or confirm diagnoses such as posterior elemental biomechanical back pain caused by structural abnormalities.

The injection blocks the pain, and the patient then performs the same activities that usually aggravate his or her back pain. The physiatrist records any effects and establishes a diagnosis from his or her findings. The absence of lower back pain after the injections suggests that the facet joint(s) is the source of the problem. Therapeutic injections provide temporary pain relief that may facilitate other types of treatment, such as physical therapy.

Epidural blocks 62280-62282 describe injection of neurolytic substances. These injections are primarily therapeutic and provide pain relief by permanently destroying damaged nerves.

You can usually distinguish between these procedures simply by noting the substance the physician injects.

If the physiatrist injects steroids or anesthetics, you should select 64470-64476, depending on the injection location (such as 64470, Injection, anesthetic agent and/or steroid, paravertebral facet joint or facet joint nerve; cervical or thoracic, single level). If the physician injects neurolytic substances, such as alcohol, phenol or iced saline solutions, you should report 62280-62282 based on the injection location (for example, 62280*, Injection/infusion of neurolytic substance [e.g., alcohol, phenol, iced saline solutions], with or without other therapeutic substance; subarachnoid).

Note that several other code groups, specifically 62310-62311, 62318-62319 and 64479-64484, describe various types of epidural blocks, not all of which involve permanent nerve destruction (for instance, 64479, Injection, anesthetic agent and/or steroid, transforaminal epidural; cervical or thoracic, single level). But the descriptors for these codes are more general than those for facet joint injections and do not specifically target the paravertebral space.

Advice for You Be the Coder and Reader Questions was provided by **Laureen Jandroep, OTR, CPC, CCS-P, CPC-H, CCS**, director and senior instructor for the CRN Institute, an online coding certification training center; and **Marvel J. Hammer, RN, CPC, CHCO**, owner of MJH Consulting, a physician reimbursement consulting firm in Denver.