

Eli's Rehab Report

READER QUESTION ~ Pick Pain Continuous Infusion Codes Carefully

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Question: I know we can use 64416, 64446, 64448 and 64449 for pain infusions. How should we determine which code to use?

North Dakota Subscriber

Answer: The most important piece of information you must have before choosing a pain continuous infusion code is: Which nerve is the physician targeting?

If the physiatrist targets the brachial plexus, choose 64416 (Injection, anesthetic agent; brachial plexus, continuous infusion by catheter [including catheter placement] including daily management for anesthetic agent administration).

For the sciatic nerve, choose 64446 (... sciatic nerve, continuous infusion by catheter [including catheter placement], including daily management for anesthetic agent administration).

If the infusion targets the femoral nerve, choose 64448 (... femoral nerve, continuous infusion by catheter [including catheter placement] including daily management for anesthetic agent administration).

For pain control at the lumbar plexus, choose 64449 (... lumbar plexus, posterior approach, continuous infusion by catheter [including catheter placement] including daily management for anesthetic agent administration).

Caution: You shouldn't report 01996 (Daily hospital management of epidural or subarachnoid continuous drug administration) with 64416, 64446, 64448 and 64449, CPT guidelines state. The reason is that 64416 includes management days with a 10-day global period. And the descriptors for 64416, 64446, 64448 and 64449 specify that they include daily management for anesthetic agent administration.

Best bet: Before filing a claim, ask your payer if it will cover continuous infusion for pain relief. You may find that some insurers consider these services medically unnecessary and/or investigational.