Eli's Rehab Report

Reader Question: Report Botox Injections per Operative Session

Question: Our physiatrist administered three Botox injections to a patient's right arm, but the injections were not at the same site on the arm. Should we report 64614 x 3?

Virginia Subscriber

Answer: PM&R practices should report Botox injections with the appropriate injec-tion code depending on the site injected. The most common Botox injection codes are:

1. 64612 Chemodenervation of muscle(s); muscle(s) innervated by facial nerve (e.g., for blepharospasm, hemifacial spasm)
2. 64613 ... cervical spinal muscle(s) (e.g., for spasmodic torticollis)
3. 64614 ... extremity(s) and/or trunk muscle(s) (e.g., for dystonia, cerebral palsy, multiple sclerosis)
4. 67345 Chemodenervation of extraocular muscle.

Medicare payers reimburse for these injection codes "per operative session" regardless of the number of injections performed per site. The policy for TrailBlazer (a Part B carrier in Virginia) offers the following examples of "injection sites":

5. one eye (including all muscles surrounding eye and both upper and lower lids)
6. one side of the neck
7. one side of the face
8. all muscles of one limb and their associated girdle muscles.

Under these criteria, you should bill three injections into a cerebral palsy patient's arm with only one unit of 64614 because all the muscles of one limb are counted as a single site. But you should bill injections to both sides of a blepharospasm patient's face bilaterally (appended with modifier -50, Bilateral procedure), because each side of the face is considered a separate injection site.

Also remember to report the appropriate HCPCS code to represent the type of Botox the physician injected either J0587 (Botulinum toxin type B, per 100 units) or J0585 (Botulinum toxin type A, per unit).

You Be the Coder and Reader Questions were reviewed by **Laureen Jandroep, OTR, CPC, CCS-P, CPC-H, CCS**, director and senior instructor for the CRN Institute.

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