

## Eli's Rehab Report

### Reader Questions: Electrical Stimulation

Question: Our physiatrist introduced electrical stimulus to a patient's pain site using surface electrodes attached to a neurometer. He coded this using 64470 (Injection, anesthetic agent and/or steroid, paravertebral facet joint or facet joint nerve; cervical or thoracic, single level) because he said the result is to anesthetize the patient's cervical pain. Is this an accurate code for this procedure?

Tennessee Subscriber

Answer: You should report 64470 only if the physiatrist performs an injection. CPT introduced this code specifically for facet joint and facet joint nerve injections, and it is not intended for electrical stimulation

Your physiatrist is likely performing a procedure classifiable to 64550 (Application of surface [transcutaneous] neurostimulator). Check with the physiatrist to confirm that he is administering transcutaneous electrical nerve stimulation (TENS) to the patient using the neurometer, and if so, 64550 would be accurate.

If the physiatrist is holding an electrical stimulator on the patient's skin, 97032 (Application of a modality to or more areas; electrical stimulation [manual], each 15 minutes) is the most accurate code choice.

Code unattended electrical stimulation (when the physiatrist sets the patient up on an electrical stimulation machine and leaves the room) as 97014 (Application of a modality to one or more areas; electrical stimulation [unattended]).