

Eli's Rehab Report

Reader Questions: Report 64450 for Lesser Occipital Nerve Block

Question: What is the correct way to bill for bilateral greater and lesser occipital nerve blocks? Would this be 64405, 64405-59, 64413 and 64413-59?

Kansas Subscriber

Answer: The two occurrences of 64413 (Injection, anesthetic agent; cervical plexis) are incorrect. The reason is that the lesser occipital nerve is not synonymous with a cervical plexus block, which means you need to report 64450 (... other peripheral nerve or branch) instead.

You will have to examine your documentation to verify the other codes. Look for whether the physiatrist separately injected the four nerves or whether the physiatrist flooded the posterior occipital area with a single or two injections that effectively blocked more than one nerve.

If the physiatrist flooded the occipital area with a single injection, you may only report 64450.

The nerves at certain points along their course are fairly close anatomically. Some physiatrists are able to block both nerves with one injection with a larger volume injected than typically used in a single nerve injection.

If the physiatrist separately injects four nerves, you'll report 64405 (... greater occipital nerve) and 64413.

Your modifier will depend on your payer and whether they follow the RBRVS determination for non-allowable bilateral status for both 64405 and 64450. Some payers will process with modifiers RT (Right side) and LT (Left side), while others will not.

You Be the Coder and Reader Questions were reviewed by **Marvel Hammer, RN, CPC, CCS-P, CHCO**, owner of MJH Consulting in Denver.