

Eli's Rehab Report

READER QUESTIONS: Use Unlisted When There's No Valid Code

Question: What is the correct CPT Code for percutaneous cervical diskectomy?

Tennessee Subscriber

Answer: You won't find a valid code for percutaneous cervical diskectomy. Try using the unlisted-procedure code 64999 (Unlisted procedure, nervous system). You could base your fees on RVUs associated with 62287 and explain (in your accompanying letter of explanation) that there is no valid code for the cervical anatomic location but that the procedure is similar in aspect to work, risk, and practice expense.

The description for CPT code 62287 is "Aspiration or decompression procedure, percutaneous, of nucleus pulposus of intervertebral disk, any method, single or multiple levels, lumbar (e.g., manual or automated percutaneous diskectomy, percutaneous laser diskectomy)."

You shouldn't use 62287 for a cervical procedure - the anatomic location in the code description will not match what your provider indicates in his documentation. And if you coded this procedure as 62287, the diagnosis code that you use (722.0, Displacement of cervical intervertebral disc without myelopathy) will not create medical necessity for a lumbar procedure. So your payer will catch that and deny your claim for reasons of medical necessity.