

Eli's Rehab Report

You Be the Coder: Chemodenervation on Right Leg and Right Arm

Question: I'm confused. Can I use modifier 50 (Bilateral procedure) with [CPT 64614](#) if my physiatrist treats a right leg and right arm during the same visit?

Michigan Subscriber

Answer: No, you should not use modifier 50 for chemodenervation services performed on a right leg and right arm. The use of modifier 50 is applicable only to services and/or procedures performed on identical anatomic sites, aspects, or organs - for example, the right knee and left knee.

Whether you can report multiple units of 64614 for chemodenervation to multiple sites depends on the payer and the rules that they follow. You'll discover that the American Medical Association's CPT Assistant advice doesn't jibe with many Medicare LCD/LMRP policies.

The February 2005 issue of CPT Assistant responded to a coding question regarding the appropriateness of adding modifier 50 to 64614 (Chemodenervation of muscle[s]; extremity[s] and/or trunk muscle[s] [e.g., for dystonia, cerebral palsy, multiple sclerosis]) when the physician treats both extremities at the same session. The answer, in summary, was that you should not use modifier 50, and that you should report this code ONLY once within a single session for chemodenervation of any of the areas in the code description.

This answer, however, varies with many Medicare LCD/LMRP policies that frequently allow one unit of service per each contiguous limb or trunk.

That means that if a provider performed chemodenervation on the right leg and right arm, many Medicare carriers will allow you to report two units of service. They count multiple injections within a single contiguous unit as one unit.