

Eli's Rehab Report

You Be the Coder: Fluoroscopy With Discography Injection

Question: Can I report 76005-26 with CPT 62290 ?

South Carolina Subscriber

Answer: Typically, you should not report 76005-26 (Fluoroscopic guidance and localization of needle or catheter tip for spine or paraspinal diagnostic or therapeutic injection procedures [epidural, transforaminal, epidural, subarachnoid, paravertebral facet joint, paravertebral facet joint nerve or sacroiliac joint], including neurolytic agent or destruction; professional component) with 62290 (Injection procedure for discography, each level; lumbar). The reason is that your physiatrist would not perform the injection and then hand the procedure off for someone else to perform to do supervision and interpretation. The physician also has to perform the supervision and interpretation, because that's what tells them if the patient needs more medication and so on.

You'll almost always have a fluoroscopy as a component of a discography, so the correct way to report the services you describe is with codes 72295 (Discography, lumbar, radiological supervision and interpretation) and 62290, or 72285 (Discography, cervical or thoracic, radiological supervision and interpretation) and 62291 (Injection procedure for discography, each level; cervical or thoracic).

Remember: According to the National Correct Coding Initiative (NCCI), effective July 1, 2001, you shouldn't report 76005 along with 72295 for the same procedure. NCCI considers the fluoroscopic guidance (76005) a component code or bundled into the discography radiologic supervision and interpretation code (either 72285 or 72295).