

## Eli's Rehab Report

## You Be The Coder: How to Report Botox for Blepharospasm

Question: How should I report Botox injections to control blepharospasm?

Texas Subscriber

**Answer:** You should select <u>CPT 64612</u> (Chemodenervation of muscle[s]; muscle[s] innervated by facial nerve [e.g., for blepharospasm, hemifacial spasm]) for these injections, according to CPT.

Physiatrists often perform chemodenervation using Botox to treat blepharospasm (333.81), which causes uncontrollable eyelid-muscle contractions.

Medicare payers allow reimbursement for a single unit of 64612 per site. For example, if the physiatrist injects Botox into the skin around both eyes to treat blepharospasm, you should report 64612 with modifier -LT (Left side) on the first line of the CMS-1500 form and 64612-51-RT (Multiple procedures; Right side) on the second line to show that you performed the procedure bilaterally. Some payers prefer that you report one unit of 64612 with modifier -50 (Bilateral procedure) appended. But if the physiatrist administers more than one injection on the same side, you should report 64612 only once.

You should report the HCPCS code J0585 (Botulinum toxin type A, per unit) for the drug.

Some coders erroneously report 67345 (Chemodenervation of extraocular muscle) to represent chemodenervation of the eye, but this code specifically describes treatment for strabismus (378.xx).