

Outpatient Facility Coding Alert

Reader Question: Yes, Reporting 77003 With 62310 Is Acceptable

Question: Do payers allow you to report fluoroscopy in conjunction with an interlaminar epidural block? If so, how do I code the fluoroscopy?

Oregon Subscriber

Answer: Good news: You can report fluoroscopic guidance with interlaminar epidural blocks.

Remember: Report an interlaminar epidural injection just as you would a single epidural injection. Code the procedure based on the injection location, with either 62310 (Injection[s], of diagnostic or therapeutic substance[s] [including anesthetic, antispasmodic, opioid, steroid, other solution], not including neurolytic substances, including needle or catheter placement, includes contrast for localization when performed, epidural or subarachnoid; cervical or thoracic) or 62311 (... lumbar, sacral [caudal]).

The use of the phrase "includes contrast for localization" in the code definition can cause confusion, but revised guidelines introduced in CPT® 2012 state, "Fluoroscopy (for localization) may be used in the placement of injections reported with 62310-62319, but is not required. If used, fluoroscopy should be reported with 77003 (Fluoroscopic guidance and localization of needle or catheter tip for spine or paraspinal diagnostic or therapeutic injection procedures [epidural or subarachnoid])."

Caution: The descriptors for some injection procedures include fluoroscopy, so in those instances you won't separately report 77003. For example, codes 64490-64495 (Injection[s], diagnostic or therapeutic agent, paravertebral facet [zygapophyseal] joint [or nerves innervating that joint] with image guidance [fluoroscopy or CT] ...) include fluoroscopic or CT guidance.