

Pain Management Coding Alert

Insider Info: Get the Lowdown on These Common Epidural Injection Questions

Should you be coding for drug supply on injections? Find out.

Patients reporting to your PM specialist with certain types of back or neck pain will require epidural injections-either in the cervical/thoracic area or the lumbar/sacral area.

Coding challenge: These codes specify whether or not the provider used guidance during the epidural, and the injections require a couple of drugs to alleviate the patient's condition. But how does use of guidance affect coding, and what about the drugs that your provider uses to treat the patient?

We've drilled down into the finer details of epidural injection coding with a couple of experts; take a look before you code your next cervical/thoracic or lumbar/sacral shot.

Use These Base Codes

Remember that you'll choose from the following codes for these types of epidural shots, confirms **Kelly Dennis, MBA, ACS-AN, CAN-PC, CHCA, CPC, CPC-I**, owner of Perfect Office Solutions in Leesburg, Florida:

- 62320 (Injection(s), of diagnostic or therapeutic substance(s) (eg, anesthetic, antispasmodic, opioid, steroid, other solution), not including neurolytic substances, including needle or catheter placement, interlaminar epidural or subarachnoid, cervical or thoracic; without imaging guidance) if the service doesn't include imaging guidance.
- 62321 (... with imaging guidance (ie fluoroscopy or CT)) if the service includes imaging guidance.
- 62322 (Injection(s), of diagnostic or therapeutic substance(s) (eg, anesthetic, antispasmodic, opioid, steroid, other solution), not including neurolytic substances, including needle or catheter placement, interlaminar epidural or subarachnoid, lumbar or sacral (caudal); without imaging guidance) if the service doesn't include imaging guidance.
- 62323 (... with imaging guidance (ie fluoroscopy or CT)) if the service includes imaging guidance.

Accurate Needle Placement Is the Point of Guidance

If the PM specialist needs assistance finding the exact spot to make the epidural injection, she might use imaging guidance; either fluoroscopy or computed tomography (CT).

For guidance on these injections, "fluoroscopy is most typical for these injections; [it] provides a real-time magnified view of the area. CT guidance is another option, but I haven't seen that used in my experience," explains **Denise Paige, CPC, COSC**, of PIH Health in Whittier, California

Best bet: If you see evidence of fluoroscopy or CT guidance for an epidural injection, be sure to choose from the CPT® codes that include guidance.

Stop Before Coding for Drug Supply

When the PM specialist performs a cervical/thoracic or lumbar/sacral epidural injection, she will usually inject a form of cortisone along with a local anesthetic, such as Marcaine, according to Paige.

You should think twice about reporting the drug supply, though. "Typically these procedure are provided in a facility

setting, outpatient or a surgery center; and the facility would bill for the drugs administered during the procedure,” Paige continues.