

## Pain Management Coding Alert

### Reader Question: Find Injection/Infusion Evidence on Nerve Blocks

**Question:** After performing a level-four new patient evaluation and management (E/M) service for a patient, the PM physician performs a paraspinous thoracic nerve block. I'm not sure which code to report for the block; could you help?

Massachusetts Subscriber

**Answer:** There are a trio of codes for paravertebral/paraspinous blocks (PVBs), and you'll need to know whether the provider used injection or infusion in order to code correctly. Also, there's a separate add-on code if the physician performed more than one injection during the PVB.

Check with the provider, or comb through the operative notes, to find answers to the above questions. Then, you'll choose from the following codes, based on encounter specifics:

- 64461 - Paravertebral block (PVB) (paraspinous block), thoracic; single injection site (includes imaging guidance, when performed)
- +64462 - ... second and any additional injection site(s) (includes imaging guidance, when performed) (List separately in addition to code for primary procedure)
- 64463 - ... continuous infusion by catheter (includes imaging guidance, when performed).

**Remember:** You can code for the E/M as well, provided that the service was distinct and separately identifiable from the PVB. For the E/M, report 99204 (Office or other outpatient visit for the evaluation and management of a new patient, which requires these 3 key components: a comprehensive history; a comprehensive examination; medical decision making of moderate complexity ...) with modifier 25 (Significant, separately identifiable evaluation and management service by the same physician or other qualified health care professional on the same day of the procedure or other service) appended.