

Pain Management Coding Alert

Reader Question: Push Pause, Count Minutes Before Coding Repeat Shot

Question: A patient with complex regional pain syndrome (CRPS) I in her arm receives a therapeutic intravenous (IV) push for therapy, followed by another push of the same substance. Can I report more than one CPT® code for these pushes?

Virginia Subscriber

Answer: It depends on how much time elapsed between pushes. If the second push occurs less than 30 minutes after the end of the first push, report 96374 (Therapeutic, prophylactic, or diagnostic injection (specify substance or drug); intravenous push, single or initial substance/drug) for the encounter.

If the second push occurs more than 30 minutes after the first, you can report 96374 for the first push and +96376 (... each additional sequential intravenous push of the same substance/drug provided in a facility (List separately in addition to code for primary procedure)) for the second.

You'll need to remember to document the push times for this claim. If the provider hasn't already provided detail that proves the pushes occurred more than 30 minutes apart, get that detail in the record before filing 96374 and +96376. Payers are pretty insistent that you use the add-on code properly, so any lapse in documentation could affect this claim.

ICD-10: For this patient, you'll choose from the following ICD-10 codes, depending on the patient's specific condition:

- G90.511 - Complex regional pain syndrome I of right upper limb
- G90.512 - ... left upper limb
- G90.513 - ... upper limb, bilateral
- G90.519 - ... unspecified upper limb.

Also: Don't forget to code for the drug supply as well as the IV push - or pushes.