

Pain Management Coding Alert

Reader Question: Understand 'Subarachnoid' and 'Epidural' for Correct 62280-62282 Choice

Question: How can I differentiate between injection/infusion codes 62280-62282? Specifically, what do the terms "subarachnoid" and "epidural" refer to in these codes?

Texas Subscriber

Answer: Codes 62280 (Injection/infusion of neurolytic substance [e.g., alcohol, phenol, iced saline solutions], with or without other therapeutic substance; subarachnoid), 62281 (... epidural, cervical or thoracic) and 62282 (... epidural, lumbar, sacral [caudal]) all describe injection or infusion of a neurolytic substance. CPT® further differentiates among these codes according to depth and location of the injection or infusion.

Report 62280 for all injections/infusions the physician provides to the subarachnoid space, regardless of the spinal level. The subarachnoid space describes the area beneath the arachnoid membrane (the middle of the three coverings surrounding the central nervous system), which lies below the dural layer.

If the provider specifies injection/infusion to the epidural (rather than subarachnoid) space, you report either 62281 or 62282, according to the spinal location. For an injection/infusion to the cervical or thoracic level, choose 62281. For an injection/infusion to the lumbar or sacral (caudal) level, submit 62282.

Take note: When reporting 62280-62282, you may claim multiple injections by billing multiple units and appending modifier 51 (Multiple procedures) to the second and subsequent units. For instance, if the physician provides two epidural injections of a neurolytic substance -- one each at a cervical and lumbar level -- you should report 62282, 62281-51. The physician's documentation must independently support the use of each code, outlining the dose, location, and medical necessity for all injections.