

Pain Management Coding Alert

Reader Questions: Billing 77002 With 64420 or 6442? Check for Distinct Procedures

Question: Are we able to bill for fluoroscopic guidance separately for intercostal nerve blocks, or is it bundled?

Virginia Subscriber

Answer: When billing an intercostals nerve block, you report either 64420 (Injection, anesthetic agent; intercostal nerve, single) or 64421 (...intercostal nerves, multiple, regional block), based on the number of injections your provider administers. The appropriate fluoroscopic guidance code is 77002 (Fluoroscopic guidance for needle placement [e.g., biopsy, aspiration, injection, localization device]).

Correct Coding Initiative (CCI) edits list 77002 as a Column 2 code of both 64420 and 64421. However, you might be able to append a modifier to 77002 to break the bundling edit and report both codes if you have sufficient documentation to support the procedures as separate services.

Caveat: The only avenue to bill both the intercostal nerve block code and the fluoroscopic image guidance code would be if your provider performed the image guidance with a different procedure from the nerve block. For example, if the provider also injected the patient's right hip and used the fluoroscopy was used for guidance of the hip injection, it would be compliant to append modifier 59 (Distinct procedural service) to the 77002 code to indicate to the payer that the provider in fact did use the image guidance with a different procedure in a different anatomic location.

If the provider only performed the intercostal block with the fluoro image guidance, then it would not be compliant to use a modifier to bypass the bundling edit regardless of "sufficient" documentation.