



Regional Anesthesia News

Winter 2005 Volume 4



Calendar of Upcoming Events:

- > December 9-13, 2005, 59th Post Graduate Assembly in Anesthesia, New York, New York.
- > December 17, 2005, 4th Annual NYSORA Symposium, New York, New York.
- > April 6-9, 2006, 31st ASRA Spring meeting, Rancho Las Palmas, California.

Links:

Useful Websites Related to Regional Anesthesia

- > <http://www.arrowintl.com>
- > <http://www.nysora.com/>
- > <http://www.asra.com/Main.html>
- > <http://www.regionalblock.com>
- > <http://www.anesth.uiowa.edu/rasci.com>

New Link from Dr. Gerancher at Wake Forest.

- > <http://www.allnumbedup.com/>

If there are any events you would like to add to the next newsletter please email me at kelly.marciniak@arrowintl.com

Local News Story

- > The following link discusses how Washington hospital in PA is using nerve blocks for knees to help with pain management. http://www.washingtonhospital.org/news_main.htm

Billing For Blocks

The following information provided by Reimbursement Principles is not intended to represent all coding options and provides only a suggested pathway to allow providers to make their own coding decisions. Diagnoses and procedure coding is dependent on documentation in the patient's medical record. The information in this document is not intended to increase or maximize reimbursement by any payer. Providers assume full responsibility for all reimbursement decisions or actions. Reimbursement Principles and Arrow International strongly suggest that you consult your payer organizations with regard to local coverage and reimbursement policies.

Reimbursement Principles and Arrow International make no representation, guarantee or warranty, expressed or implied, that this compilation is error-free or that the use of this information will prevent differences of opinion or disputes with Medicare or other third-party payers, and will bear no responsibility or liability for the results or consequences of its use.

- > Many payers have coverage guidelines specific to nerve blocks. Coverage and consequently payment is predicated upon medical necessity. If medical necessity is not clearly established in the patient's medical records, the nerve block will be considered a non-covered service.
- > Correct coding and billing for peripheral nerve block procedures is dependent upon the documentation contained in the patient's medical records. Physicians must carefully and uniformly document peripheral nerve block procedures to facilitate reimbursement. At a minimum, the following information is needed in the patient's medical record.
 - Diagnosis - The diagnosis associated with the block
 - Intent of the procedure (e.g. to provide post-operative pain relief not achievable through use of...)
 - If applicable, who (e.g. surgeon) requested the procedure for post-operative analgesia
 - Procedure - detailed description of procedure including
 - > Site of nerve block
 - > Preparation solution used
 - > Size and type of needle
 - > Catheter used
 - > End points used
 - > Any complications
 - > Local anesthetic solution and volume, slow incremental injection with negative aspiration

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- > When regional or general anesthesia is administered for a surgical procedure and the peripheral nerve block is performed to provide post-operative pain management, the nerve block is considered a separate and distinct service and reported in addition to the anesthesia code. The anesthesiologist should attach modifier -59 to the nerve block procedure code to indicate a distinct procedural service
 - If, on the other hand, the nerve block is used as the anesthesia for a surgical procedure, the nerve block should be reported using the anesthesia code alone.
 - Should the physician be denied reimbursement, an appeal should be submitted to the payer explaining the procedure and medical justification. Detailed documentation in the medical records will aid in this process.
- > In order to increase likelihood of reimbursement, the patient's payer should be contacted in advance of the procedure to clarify benefits and limitations. Medical necessity should be well documented in the patient's medical record and physicians should also consider submitting the full procedure note, separate from the anesthetic record.
- > If a nerve block is provided for post-operative analgesia, time and base units typically used in reimbursing for anesthesia are not a consideration.

Single shot injection peripheral nerve block		Continuous infusion for peripheral nerve block	
64415	Injection, anesthetic agent; brachial plexus, single	64416	Injection, anesthetic agent; brachial plexus, continuous infusion by catheter (including catheter placement) including daily management for anesthetic agent administration
64445	Injection, anesthetic agent; sciatic nerve, single	64446	Injection, anesthetic agent; sciatic nerve, continuous infusion by catheter, (including catheter placement) including daily management for anesthetic agent administration
64447	Injection, anesthetic agent; femoral nerve, single	64448	Injection, anesthetic agent; femoral nerve, continuous infusion by catheter (including catheter placement) including daily management for anesthetic agent administration
64450	Injection, anesthetic agent; other peripheral nerve or branch	64449	Injection, anesthetic agent; lumbar plexus, posterior approach, continuous infusion by catheter (including catheter placement) including daily management for anesthetic agent administration

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- > Arrow International, Inc. recognizes that reimbursement is a very important topic for our customers. Arrow also recognizes that reimbursement policies are complex and change frequently.
- > As a resource to address reimbursement questions, Arrow offers a toll-free reimbursement hotline and retains the services of Reimbursement Principles, Inc. The disclaimers and suggestions noted below apply equally to any information provided by Reimbursement Principles, Inc.

Reimbursement Hotline: 1-888-260-4192, (8am-5pm Mountain Time, Monday-Friday)

Please be prepared to provide your name, hospital/affiliation, email address and phone number in addition to your reimbursement question.

Arrow International is providing this information as a resource for hospitals when making reimbursement coding determinations for Arrow products used in the hospital setting. Arrow International makes no statement, promise, express or implied warranty or guarantee that (i) the information is complete or error-free, (ii) the use of this information will prevent differences of opinion or disputes with payors, (iii) use of these codes will result in coverage or reimbursement, or (iv) the provider will be guaranteed or actually paid reimbursement. This information is intended as a resource to healthcare providers in seeking legitimate coverage and reimbursement for health care services. It is not intended to increase or maximize reimbursement, or induce inappropriate reimbursement, by any payor. Providers assume full responsibility for all reimbursement decisions or actions. We strongly suggest that you consult your payor organizations and obtain independent, professional advice with regard to local coverage, bundling requirements, and reimbursement policies.

■ **Other Reimbursement References:**

Billing for Outpatient Regional Anesthesia Services in the United States.

- > International Anesthesiology Clinics. Regional Anesthesia for Ambulatory Surgery. 43(3):33-41, Summer 2005. Jennifer Greger, MD; Brian A Williams, MD, MBA. The above volume is dedicated to regional anesthesia in the outpatient setting and is a great resource for all clinicians moving toward regional anesthesia in ambulatory care.
- > Reg Anesth Pain Med. 2005 Jan-Feb;30(1):67-71. Development of a standardized peripheral nerve block procedure note form. Gerancher JC, Viscusi ER, Liguori GA, McCartney CJ, Williams BA, Ilfeld BM, Grant SA, Hebl JR, Hadzic A. Department of Anesthesiology, Wake Forest University School of Medicine, Winston-Salem, NC 27157-1009, USA.

Links to Medicare Policies:

- > <http://www.hgsa.com/professionals/bguides/pf-anesthesia.shtml>
- > <http://www.hgsa.com/professionals/pdf/bg-anes.pdfnizations>.
- > Joint Commission on the Accreditations of Healthcare Organizations. Pain Management Standards. 2001. Available at: <http://www.jcaho.org/accredited+organizations/hospitals/standards/revisions/index.htm>
- > American Society of Anesthesiologists. Medicare and Anesthesia Reimbursement Methods: Why the Medicare Fee Schedule Is the Wrong Benchmark for Commercial Anesthesia payments. 1999. Available at: <http://www.asahq.org/publications> and [medicareslides p.6.ppt](#)

■ **In the Next Issue :**

- > Resources for patients.

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