

Policy Name: Facet Joint Nerve Blocks

Effective: July 1,2007

Description: Medica reimburses for facet joint nerve blocks only when one of the diagnosis codes listed below are included on a claim

CPT/HCPCS Codes:

64470	Injection, anesthetic agent and /or steroid, paravertebral facet joint or facet joint nerve; cervical or thoracic, single level
64472	Injection, anesthetic agent and /or steroid, paravertebral facet joint or facet joint nerve; cervical or thoracic, each additional level
64475	Injection, anesthetic agent and /or steroid, paravertebral facet joint or facet joint nerve; lumbar or sacral, single level
64476	Injection, anesthetic agent and /or steroid, paravertebral facet joint or facet joint nerve; lumbar or sacral, each additional level

Covered ICD-9 Diagnoses Codes:

721.0	724.02						
721.1	724.09						
721.2	724.1						
721.3	724.2						
721.42	733.13						
721.90	738.4						
722.10	805.01						
722.11	805.02						
722.4	805.03						
722.51	805.04						
722.52	805.05						
722.81	805.06						
722.82	805.07						
722.83	805.08						
723.1	805.2						
724.00	805.4						
724.01							

References and Resources

1. American Medical Association, Current Procedural Terminology (CPT) Book - Professional Edition
2. ICD-9-CM 2007 - Expert Edition
3. Center for Medicare and Medicaid Service's local coverage determinations
4. Information received from various specialty societies

Revision Date: 4/1/2008