



American Academy of Ophthalmic Executives®

Fact Sheet: Coding for Blepharospasm, Hemifacial Spasm

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CPT Code

64612 Chemodenervation of muscle(s); muscle(s) innervated by facial nerve, unilateral (eg, for blepharospasm, hemifacial spasm)

Global Period

10-day The exam performed the same day as the injection must be significantly, separately identifiable to meet the criteria for modifier -25.

Modifiers

- 25** Significantly, separately identifiable E/M or Eye visit code the same day as the injection(s)
- 50** Both sides of the face are treated. Note: Medicare requires a 1 in the unit field. Correct payment is 150 percent of the allowable.
- JW** When reporting wastage
- RT** Only the right side of the face is treated
- LT** Only the left side of the face is treated

Documentation Checklist

General rule: Before considering if coverage may be made, you should establish that the patient has been unresponsive to conventional methods of treatments such as artificial tears or other medications, physical therapy and other appropriate methods used to control the spasms.

Exception to general rule: For certain treatments including hemifacial spasm or blepharospasm, Botulinum toxin can be an initial mode of therapy. In these circumstances, it is not necessary to show that other methods of treatment have been tried and proven unsuccessful.

Use this checklist to document compliance:

- Patient functional complaint (eg, how symptoms affect activities of daily living unique to the patient)
- Relevant medical history
- The ophthalmologist's exam/assessment to include documentation of the medical necessity for this treatment
- Results of pertinent tests which may not be applicable
- Description of the effectiveness of this treatment.
 - If previously treated, what was the effect? Such as helped control symptoms for two months, then eye closure returned and could not read.

- Documentation of unsuccessful, inadequate response, or not a candidate for conventional methods of treatment, and/or other appropriate methods used to control condition as applicable
- Document risks, benefits and alternatives discussed with the patient
- Documentation that the patient wishes to proceed with injections
- Informed consent signed
- Signed and dated office visit.
- Every page of the record must be legible and include appropriate patient identification information (e.g., complete name, dates of service[s]).

Important: The documentation must include the legible signature of the physician or non-physician practitioner (nurse practitioner or physician assistant) responsible for and providing care to the patient.

Operative Notes

Notes include:

- Diagram of injection sites and dosage
- Type and strength of botulinum toxin used
- Complications
- Planned follow-up

Drug

Documentation includes:

- Lot number
- NDC number*
 - 100u 00023-1145-01
 - 200u 00023-3921-02
- Units used
- Units wasted
- Inventory log recording vials used, patient names, dosage injected/wasted, and dates of service are readily available in the event of an external audit

*Botox and Botox Cosmetic vials

BOTOX and BOTOX Cosmetic contain the same active ingredient in the same formulation, but with different labeled Indications and Usage. The NDC for medical and cosmetic use varies.

HCPCS Codes

Note: The unit dose of one form must not be equated with the unit dose of any of the others, i.e., one unit of Botox does not equal one unit of Dysport, Xeomin or Myobloc.

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| C9399 | Unclassified drugs or biologicals (facility) |
| J0585 | ONABOTULINUMTOXINA, 1 unit Botox Example 100u vial, 25 units injected, 75 units wasted J0585 25 units J0585 -JW 75 units Total 100 units billed (1 unit x 100 = 100u vial) |

Coding for Blepharospasm, Hemifacial Spasm *continued*

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| J0586 | <p>ABOBOTULINUMTOXINA, 5 UNITS Dysport</p> <p>Example 300u vial, 75 units injected, 225 units wasted J0586 15 units J0586 -JW 45 units</p> <p>Total 60 units billed (5 units x 60 = 300u vial)</p> |
| J0587 | <p>RIMABOTULINUMTOXINB, 100 UNITS Myobloc</p> <p>Example 5000u vial, 4000 units injected, 1000 units wasted J0587 40 units J0587 -JW 10 units</p> <p>Total 50 units billed (100 units x 50 = 5000u vial)</p> |
| J0588 | <p>INCOBOTULINUMTOXIN A, 1 UNIT Xeomin</p> <p>Example 100u vial, 25 units injected, 75 units wasted J0588 25 units J0588 -JW 75 units</p> <p>Total 100 units billed (1 unit x 100 = 100u vial)</p> |
| J3590 | UNCLASSIFIED BIOLOGICS |

ICD-10 Code Options

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|---------------|---------------------------------------|
| G24.5 | Blepharospasm |
| G24.8 | Other dystonia |
| G51.31 | Clonic hemifacial spasm, right |
| G51.32 | Clonic hemifacial spasm, left |
| G51.33 | Clonic hemifacial spasm, bilateral |
| G51.4 | Facial myokymia |
| G51.8 | Other disorders of facial nerve |
| G51.9 | Disorder of facial nerve, unspecified |

MACs, LCDs and Billing Guidelines

Note: Confirm other payer policies.

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| <p>Cigna Government Services</p> <p>Kentucky</p> <p>Ohio</p> | <p>Policy posted on aao.org/lcds:</p> <ul style="list-style-type: none"> A56472 <p>Billing Guideline</p> <p>Due to the short life span of the drug once it is reconstituted, Medicare will reimburse the unused portions of Botulinum toxins. However, the documentation in the medical records must show the precise amount of the drug administered and the amount discarded.</p> |
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| <p>First Coast</p> <p>Florida</p> <p>Puerto Rico</p> <p>Virgin Islands</p> | <p>Policies posted on aao.org/lcds:</p> <ul style="list-style-type: none"> • A57715 • L33274 <p>Billing Guidelines</p> <ul style="list-style-type: none"> • Cosmetic procedures are not a covered benefit under Medicare. Treatment of wrinkles, also referred to as glabellar lines, smoker's lines, crow's feet, laugh lines and aging neck, using botulinum toxins is considered to be a cosmetic procedure, and is not covered under Medicare. • Blepharospasm: Studies show Botox® and Xeomin® may be comparable for the treatment of blepharospasm following dose modification. Studies signify Botox® and Dysport® may be equivalent for the treatment of blepharospasm. Dysport® has backing in the IBM Micromedex® compendium DrugDex® for off-label treatment of blepharospasm in adults.¹³ Accordingly, off-label coverage has been extended for Dysport® for the treatment of blepharospasm in adults. • Hemifacial spasm: The literature indicates botulinum neurotoxin may be considered as a treatment for hemifacial spasm with minimal side effects. Studies show Botox® and Dysport®, after dosage modification, may be equal in effectiveness. Botox® and Dysport® have additional support in the IBM Micromedex® compendium DrugDex® for off-label treatment of hemifacial spasm in adults.¹³ Subsequently, off-label coverage has been extended for Botox® and Dysport® as a treatment of hemifacial spasm in adults. |
| <p>National Government Services</p> <p>JK- Connecticut, Maine, Massachusetts, New Hampshire, New York, Rhode Island and Vermont</p> <p>J6- Illinois, Minnesota and Wisconsin</p> | <p>Policies posted on aao.org/lcds:</p> <ul style="list-style-type: none"> • A52848 • L33646 <p>Billing Guidelines</p> <ul style="list-style-type: none"> • Blepharospasm: Botulinum toxin injection therapy is accepted first line treatment for patients with blepharospasm and/or hemifacial spasm. If the upper and lower lid of the same eye and/or adjacent facial muscles, or brow are injected at the same surgery, the procedure is considered to be unilateral. Bilateral procedures will only be considered when both eyes or both sides of the face are injected. • Due to the short life span of the drug once it is reconstituted, Medicare will reimburse the unused portions of Botulinum toxins. When modifier - JW is used to report that a portion of the drug is discarded, the medical record must clearly show the amount administered and the amount discarded. |
| <p>Noridian</p> <p>JE- California, Hawaii, Nevada, American Samoa, Guam, Northern Mariana Islands</p> <p>JF- Alaska, Arizona, Idaho, Montana, North Dakota, Oregon, South Dakota, Utah,</p> | <p>Policies posted on aao.org/lcds:</p> <ul style="list-style-type: none"> • A57185 • L35170 <p>Billing guidelines:</p> <ul style="list-style-type: none"> • Coverage of treatments provided may be continued unless any two treatments in a row, utilizing an appropriate or maximum dose of a Botulinum toxin, fail to produce a satisfactory clinical response. In such situations it may be appropriate to use an alternative Botulinum toxin once in order to determine if a more satisfactory response can be obtained. Providers must also document the results of and response to these injections. • Due to the short life of Botulinum toxin, Medicare will reimburse the unused portion of these drugs only when vials are not split between |

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| Washington, Wyoming | <p>patients. Use modifier- JW to code for drug wastage on a separate line of the claim form. The documentation must show in the patient's medical record the exact dosage of the drug given, exact amount and reason for unavoidable wastage, and the exact amount of the discarded portion of the drug.</p> <ul style="list-style-type: none"> • Scheduling of more than one patient is encouraged to prevent wastage of Botulinum toxins. If a vial is split between two patients, the billing in these instances must be for the exact amount of Botulinum toxin used on each individual patient. Medicare would not expect to see billing for the full fee amount for Botulinum toxin on each beneficiary when the vial is split between two or more patients. |
| <p>Novitas</p> <p>JL- Pennsylvania, New Jersey, Maryland, Delaware and the District of Columbia</p> <p>JH- Texas, Oklahoma, Colorado, New Mexico, Arkansas, Louisiana, Mississippi</p> | <p>Policy posted on aao.org/lcds:</p> <ul style="list-style-type: none"> • A58423 • L38809 <p>Billing guidelines:</p> <ul style="list-style-type: none"> • Blepharospasm: Studies show Botox® and Xeomin® may be comparable for the treatment of blepharospasm following dose modification. Studies signify Botox® and Dysport® may be equivalent for the treatment of blepharospasm. Dysport® has backing in the IBM Micromedex® compendium DrugDex® for off-label treatment of blepharospasm in adults.¹³ Accordingly, off-label coverage has been extended for Dysport® for the treatment of blepharospasm in adults. • Hemifacial spasm: The literature indicates botulinum neurotoxin may be considered as a treatment for hemifacial spasm with minimal side effects. Studies show Botox® and Dysport®, after dosage modification, may be equal in effectiveness. Botox® and Dysport® have additional support in the IBM Micromedex® compendium DrugDex® for off-label treatment of hemifacial spasm in adults.¹³ Subsequently, off-label coverage has been extended for Botox® and Dysport® as a treatment of hemifacial spasm in adults. |
| <p>Palmetto GBA</p> <p>JJ- Alabama, Georgia, Tennessee</p> <p>JM- North Carolina, South Carolina, Virginia and West Virginia</p> | <p>Policies posted on aao.org/lcds:</p> <ul style="list-style-type: none"> • A56646 • L33458 <p>Billing guideline:</p> <p>Chemodenervation treatment has a variable lasting beneficial effect from twelve to sixteen weeks, following which the procedure may need to be repeated. It is appropriate to inject the lowest clinically effective dose at the greatest feasible interval that results in the desired clinical result.</p> |
| <p>Wisconsin Physician Services</p> <p>J5- Iowa, Kansas, Missouri, and Nebraska</p> <p>J8- Indiana and Michigan</p> | <p>Policies posted on aao.org/lcds:</p> <ul style="list-style-type: none"> • A57474 • L34635 <p>Billing guidelines:</p> <ul style="list-style-type: none"> • It is usually considered not medically necessary to give botulinum toxin injections for spastic conditions more frequently than every 90 days. There may be slight variation based on FDA indications for a particular product. • Coverage of treatments provided may be continued unless any two treatments in a row, utilizing an appropriate or maximum dose of botulinum toxin failed to produce satisfactory clinical response. |

Split vials

Medicare payer policies vary regarding the use of split vials. Confirm your payer policy and follow the documentation and coding guidelines. Commercial, Medicare Advantage and Medicaid payers may have unique policies that vary.

| MAC | Split vial scenario | Total units billed and documentation |
|----------------------------------|--|--|
| Cigna Government Services | <p>Botox (J0585) vial is split between 3 patients:</p> <p>Patient 1: J0585, 25 units</p> <p>Patient 2: J0585, 25 units</p> <p>Patient 3: J0585, 25 units, J0585 – JW, 25 units</p> | <p>Total 100 units billed, 100u vial</p> <p>Inventory log matches documentation:</p> <p>Vial lot number</p> <p>DOS</p> <p>Patient 1: 25u</p> <p>Patient 2: 25u</p> <p>Patient 3: 25u and 25u wasted</p> |
| Noridian | <p>Botox (J0585) vial split between 3 patients</p> <p>Patient 1: J0585, 25 units</p> <p>Patient 2: J0585, 25 units</p> <p>Patient 3: J0585, 25 units</p> | <p>Total 75 units billed, 100u vial</p> <p>Per Noridian LCD, only bill wastage for a single-use vial not split between patients.</p> <p>Inventory log matches documentation</p> <p>Vial lot number</p> <p>DOS</p> <p>Patient 1: 25u</p> <p>Patient 2: 25u</p> <p>Patient 3: 25u</p> <p>25 u wasted and not billed per policy</p> |