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*Membership open to all  
Interventional Pain Physicians*

January 18, 2007

Niles R. Rosen, MD  
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Re: New Proposed NCCI Edits

Dear Dr. Rosen:

Thank you for all your help in the past. We just reviewed the latest NCCI version (CCI Updates, January 1, 2007) and we have a few concerns. On behalf of the American Society of Interventional Pain Physicians, I would like to bring these to your attention. As you aware, the American Society of Interventional Pain Physicians represents interventional pain physicians across the country with a membership exceeding 3,800. Interventional pain management is represented by specialty designation (09). The following are the concerns I would like to bring to your attention:

1) 0027T – Endoscopic lysis of epidural adhesions

This procedure is performed in the lumbar spine. However, if a patient has problems with cervical or thoracic spine because of the composition, cervical and thoracic epidurals (CPT 62310, CPT 62318) may be performed. If a patient is suffering with two problems, then the patient has to come back at another visit, which will actually increase the cost to the program.

We believe that CPT 62264 and CPT 62263 should be mutually exclusive codes.

2) Thoracic vertebroplasty and kyphoplasty (CPT 22520, CPT 22523)

Once again, for thoracic procedures, the component codes include lumbar procedures. These should be eliminated. These include CPT 62319 and CPT 64475.

3) Lumbar vertebroplasty and kyphoplasty (CPT 22521, CPT 22524)

Similar to the thoracic ones which include lumbar codes, the lumbar codes include thoracic and cervical blocks as component codes. Once again, this will increase the expense to the program. These codes are CPT 62318 and CPT 64470.

4) CPT 22526 IDET, single level

This is a new code and the component codes were established for the first time. I am not aware if CMS will be paying for IDET performed at any other level other than the lumbar. If it is only performed in lumbar and if this is the only area it is approved, then codes 62310 and 62318 and 64470 will be hindering the care.

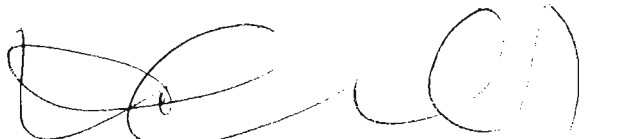
5) CPT 62287, disc decompression

The majority of times this code is used for lumbar disc decompression. However, if there are a significant number of cases where it is used in the thoracic and cervical region, the component codes may be okay, otherwise, CPT 62310, 62318, and 64470 may be best without being on the list of component codes.

6) Finally we would like to see transforaminal epidural steroid injection CPT 64479, 64480, to have a mutually exclusive code of CPT 62310 and lumbar transforaminal epidural injection, CPT 64483 and 64484 to have mutually exclusive codes of 62311.

Thank you for all your help. If you have any questions, please feel free to contact me at 2831 Lone Oak Road, Paducah, KY 42003, phone: 270-554-8373 ext. 101, fax: 270-554-8987, or e-mail: [drm@apex.net](mailto:drm@apex.net).

Thank you,



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