



All superscript numbers (Example: Description<sup>1</sup>) correspond to important notes at the bottom of this page.

**New Patient/Initial Visit Codes:**

99241-99245 or 99201-99205  
Ok to approve 99244/99204 or higher

**Established Patient/Follow Up Codes:**

99211-99215<sup>1</sup>  
Ok to approve 99214 or higher

**Reference Information:**

**Important Notes:**

1. **Botox:** (Does not apply to authorized referrals) Register and verify coverage before marking the referral STAT. Pend referral to Yesenia Martinez and mark the appointment as "clinic responsible".
2. Pediatric Neurology is considered a "High Risk" clinic meaning appointments should not be scheduled unless there is a diagnosis, pending referral, or clinical notes stating what the patient is being referred for. You can verify diagnosis by looking in the patient's chart, in the media tab, in a pending referral or by calling patients PCP's office. Also please check appointment notes to verify what the patient is being seen for. Diagnosis should match the reason for visit.
3. If a Stat referral is scheduled and in a FS WQ and has not been submitted or not pended to a clinic employee, FS will submit the request, pend the referral to Yesenia Martinez, and mark it "clinic responsible" for the clinic to follow up on.
  - a. Exception: Medical Center. FS is to submit and follow up on all authorizations requested by the Medical Center as Stat.
4. **Applies to CCS:** Patients with multiple payors can be cleared if they have CCS and any other insurance. Example: Patient has CCS and IEHP, submit for both authorizations and approve the first one that comes in. The clinic will follow up on pending CCS cases.
5. Clinic handles ALL genetic testing referred by Pediatric Neurology. Financial Services is to stat the referral and pend to Yesenia Martinez so it falls out of the referral WQ and only remains in the clinic WQ.
6. This department may schedule established patients utilizing a NEW visit type. Check patient history to ensure the patient has not been seen for their scheduled diagnosis in the last 3 years. If they have, please request return patient codes rather than new codes.



# AC Financial Services / Reference Guide

For Services referred to:

## Pediatric Specialty: Neurology (High Risk Clinic)

Required Codes:	Purpose:	Description:
95970, 95971, 95972, 95974, 95975	VNS Patients Follow Up <sup>2</sup>	95970 - Elec Alys Nstim Pls Gen Brn/Sc/Perph W/O Reprgrm 95971 - Elec Alys Nstim Pls Gen Smpl Sc/Perph W/Prgrmg 95972 - Elec Alys Nstim Pls Gen Cplx Sc/Perph 1st Hr 95974 - Elec Alys Nstim Pls Gen Cplx Crnl Nrv 1st Hr 95975 - Elec Alys Nstim Pls Gen Cplx Crnl Nrv Ea 30 Min
Injectables <sup>3</sup> :		
J0585	Botox, 1code = 1 unit	Injection, Onabotulinumtoxina
J0587	Myobloc, 1code = 100 units	Inj, Rimabotulinumtoxin B
A4215	Needle <sup>3</sup>	Sterile Needle (to administer above codes to headache patients.)
DX related administration codes:		
64611	Salivary (drooling)	Chemodenervation Parotid/Submandibular Salivary Glands, Bilateral
64612 x2	Blepharospasm, migraines	Dest,Nerve,Facial
64615	Migraines	Chemodenerv Musc Migraine
64616 x2	Torticollis and dystonia	Chemodenervation Muscle Neck Unilat For Dystonia
64617	Laryngospasm	Chemodenervation Muscle Larynx Unilat W/EMG
64642	Chemodenervation of Extremity	Chemodenervation One Extremity 1-4 Muscle
64643 x3	Chemodenervation of Extremity	Chemodenervation 1 Extremity Ea Addl 1-4 Muscle
64644	Chemodenervation of Extremity	Chemodenervation 1 Extremity 5 Or More Muscles
64645x3	Chemodenervation of Extremity	Chemodenervation 1 Extremity Ea Addl 5/< Muscles
64646	Chemodenervation of Extremity	Chemodenervation Of Trunk Muscle 1-5 Muscles
64647	Chemodenervation of Extremity	Chemodenervation Of Trunk 6 Or More Muscles
95874	EMG Guided Needle	Needle EMG Guidance For Chemodenervation (re: movement disorders)

### Clinic Contact Info:

**Diana Febres, Clinic Manager**

**x21914**

### Epic Department Names & ID:

FMGCS PEDS NUEROLOGY	100205017
FMGCS PEDS NEURO MDA	100209025
FMGCS JWEST NEURO MDA	100209031
FMGCS JWEST PEDS NEURO	100209028
FMGHP PEDS NEURO MDA	100228002
FMGSA PEDS NEURO	100236003
FMGSA PEDS NEURO MDA	100236006
MERID PEDS NEUROLOGY	100207007
MURR PEDS MDA	100212025
MURR PEDS NEUROLOGY	100212022

Please do not contact line staff directly.

### **Payor Specific Notes:**

#### **IEHP/Medical Group (IPA):**

- Initial visit authorization for patients with Autism diagnosis will be obtained through the Medical Group (IPA). All follow up visit authorizations need to be obtained directly through IEHP.