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From the Office of Health Informatics **Outpatient/Ambulatory Botox Ordering and Documentation**

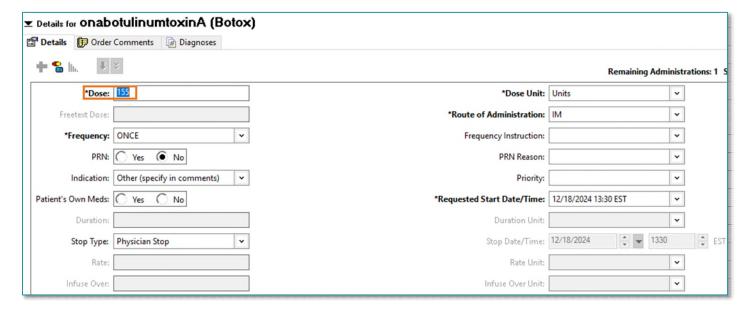
December 18, 2024

Correct ordering and documentation of Botox is important to trigger correct billing for the medication. Centers for Medicare & Medicaid Services (CMS) dictate that any unused vial amount can be billed. This flyer outlines the process used in the Outpatient/ Ambulatory setting to electronically order and document Botox administration.

Procedures using Botox

Botox is supplied by manufacturers in 50, 100, and 200-unit vials. It is important at time of placing order (or proposing to provider) to know number of units used during injection/procedure. For more information surrounding CMS requirements, click here.

General guidelines for Ordering



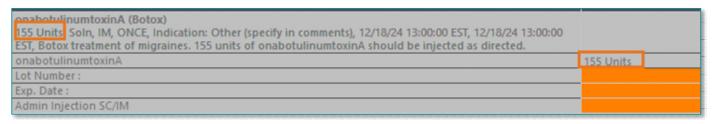
- Ordered amount needs to be the amount administered to patient, regardless of package size.
- Example: Patient is receiving 155 units of Botox related to a procedure. Office stocks 100-unit vials. Ordered amount should reflect 155 units of Botox (two vials are used with 45 units waste)
- Waste billing is managed either by a verifying pharmacist or by billing/coding/information system teams. The ordering provider and/or staff member administering Botox, does not need to manipulate order to drive waste documentation.

General guidelines for documentation of administration

From above, amount intended to be administered to patient is ordered.

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• Upon documentation, the MAR should reflect ordered amount and administered amount after medication administration documentation.



• For barcode scanning: if 100-unit vial is scanned and dose appears greater than order, the number of units should correctly match the order/number of units administered to patient.

