

Intra-joint and Surgical Site Postoperative Pain Relief Drug Delivery System (Pain Pump)0

Last Updated: 1/9/2026

Last Reviewed: 1/14/2026

Originally Effective: 7/22/2011

Last update includes payment policy changes, subject to 28 TAC §3.3703(a)(20)(D)? No

If yes, Texas Last Update Effective Date: n/a

Policy #: RPM014

Scope

Companies: Moda Partners, Inc. and its subsidiaries & affiliates (All)

Provider Contract Status: Any

Claim Forms: CMS1500 & CMS1450 (paper and electronic versions)

Claim Dates: All

Reimbursement Guidelines

Placement of a pain pump catheter(s) for postoperative pain control is not separately reimbursable, regardless of the procedure code reported. The work associated with this service is considered included in the reimbursement for the definitive and/or primary surgical procedure code(s) (e.g., knee surgery, shoulder surgery).

CPT or HCPCS code(s) inherently include all services integral to performing the surgery,¹ including but not limited to:

1. Insertion and removal of drains, suction devices, and pumps at the operative site.¹
2. Topical or regional anesthetic administered by the operating physician.^{2,3}
3. Application, management, and removal of postoperative dressings including anesthetic peri-incisional devices.¹
4. Postoperative pain management by the operating surgeon, including epidural or subarachnoid drug administration, when performed within the global period.⁵

Disposable drug delivery systems (included but not limited to A4305, A4306, A9274) do not meet Medicare's definition of durable medical equipment (DME). These systems, along with the drugs and supplies used with them, are considered surgical supplies. As such they are bundled into the reimbursement for the primary surgical procedure and are not eligible for separate reimbursement. Claims for these items will be denied as provider liability.

Definitions

Acronyms/Abbreviations

Acronym	Definition
AMA	American Medical Association
CMS	Centers for Medicare and Medicaid Services
CPT	Current Procedural Terminology
HCPCS	Healthcare Common Procedure Coding System (acronym often pronounced as "hick picks")
RPM	Reimbursement Policy Manual (e.g., in context of "RPM052" policy number, etc.)

Procedure codes (CPT & HCPCS)

There are no CPT or HCPCS codes that describe placement of a pain pump catheter.

The following listed CPT codes have been used to report the placement of a pain pump catheter for postoperative pain control. However, none of these procedure codes accurately describe this procedure, and

should not be used for this purpose. Regardless of the procedure code used, this service is not eligible for separate reimbursement.

Code	Code Description
11981	Insertion, non-biodegradable drug delivery implant
37202	Transcatheter therapy, infusion other than for thrombolysis

The following unlisted CPT codes may also be used to report the placement of a pain pump catheter for postoperative pain control. This list is not exhaustive. Other unlisted codes may also be used, depending on the surgical site involved. Regardless of the procedure code used, this service is not eligible for separate reimbursement.

Code	Code Description
19499	Unlisted procedure, breast
20999	Unlisted procedure, musculoskeletal system, general
22899	Unlisted procedure, spine
22999	Unlisted procedure, abdomen, musculoskeletal system
23929	Unlisted procedure, shoulder
27599	Unlisted procedure, femur or knee
49329	Unlisted laparoscopy procedure, abdomen, peritoneum and omentum

The following HCPCS codes may be used to report disposable drug delivery systems. This list is not exhaustive. Regardless of the procedure code used, these items are not eligible for separate reimbursement.

Code	Code Description
A4305	Disposable drug delivery system, flow rate of 50 ml or greater per hour
A4306	Disposable drug delivery system, flow rate of less than 50 ml per hour
A9274	External ambulatory insulin delivery system, disposable, each, includes all supplies and accessories

Related Policies

- A. [“Moda Health Reimbursement Policy Overview.”](#) Moda Health Reimbursement Policy Manual, RPM001.
- B. [“Global Surgery Package for Professional Claims”](#), Moda Health Reimbursement Policy Manual, RPM011.

Sources

1. CMS. National Correct Coding Initiative Policy Manual. Chapter 1 General Correct Coding Policies, §B, “Coding Based on Standards of Medical/Surgical Practice”, pages I-7 – I-10.
2. CMS. National Correct Coding Initiative Policy Manual. Chapter 4 Surgery: Musculoskeletal System, § I.20, “General Policy Statements,” p IV-18.
3. CMS. National Correct Coding Initiative Policy Manual. Chapter 4 Surgery: Musculoskeletal System, § C, “Anesthesia,” pages IV-4 – IV-5.
4. CMS. National Correct Coding Initiative Policy Manual. Chapter 1 General Correct Coding Policies, § C, pages I-10 – I-13.
5. CMS. National Correct Coding Initiative Policy Manual. Chapter 3 Integumentary System, § C, pages III-3 – III-4.
6. CMS. National Correct Coding Initiative Policy Manual. Chapters 3, 4, 5, 6, 8, 11, 12 and 13, “General Policy Statements”.
7. American Medical Association. “Introduction - Instructions for Use of the CPT Codebook.” Current Procedural Terminology (CPT). Chicago: AMA Press.

8. Noridian Healthcare Solutions, LLC & CGS Administrators, LLC. "External Infusion Pumps." Medicare DME MAC # 19003, Jurisdiction D & Medicare DME MAC # 17013, Jurisdiction B. LCD # L33794. January 1, 2021; February 24, 2021.
9. Noridian Healthcare Solutions, LLC & CGS Administrators, LLC. "External Infusion Pumps." Medicare DME MAC # 19003, Jurisdiction D & Medicare DME MAC # 17013, Jurisdiction B. Article # A52507. September 15, 2020; February 24, 2021.
10. CMS. National Correct Coding Initiative Policy Manual. Chapter 4 Surgery: Musculoskeletal System, § I.5, "General Policy Statements," p IV-15.

Policy History

Reminder: The most current version of our reimbursement policies can be found on our provider website. If you are using a printed or saved electronic version of this policy, please verify the current information by going to: https://www.modahealth.com/medical/policies_reimburse.shtml

Date	Summary of Update
1/14/2026	Acronyms updated. Minor rewording. Formatting updates. No policy changes. Retired sections: Background Information, Coding Guidelines & Sources, and Important Statement (info found in Related Policy RPM001).
1/8/2025	Updated Cross References. Formatting updates. No policy changes.
2/14/2024	Formatting updates. No policy changes.
10/12/2022	Clarified included "anesthetic devices" (pain pumps) may be located peri-incisional. Updated Coding Guidelines, References & Resources, Policy History section.
7/22/2011	Policy initially approved by the Reimbursement Administrative Policy Review Committee & initial publication.
7/22/2011	Original Effective Date (with or without formal documentation). Policy based on CMS guidelines & citations as indicated.