

## Postoperative Pain Management - Epidural Analgesia

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Revision:

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### 1.0 APPLICABILITY

This policy is mandatory for reimbursement of services provided by either network or non-network providers. However, alternative network reimbursement methodologies are permitted when approved by the Defense Health Agency (DHA) and specifically included in the network provider agreement.

### 2.0 ISSUE

How are physicians to be reimbursed for postoperative pain management?

### 3.0 BACKGROUND

**3.1** Postoperative pain management consisting mainly of the intramuscular (IM) and/or intravenous (IV) administration of patient controlled analgesia (PCA) is considered a part of the global charge for the surgery. The administration of epidural analgesia is a specialized technique that can only be provided by a specially trained physician. It includes the following services:

- Placement of the epidural catheter (an invasive procedure requiring about 20 minutes).
- Mixing of the epidural analgesia infusion.
- Programming and initiation of infusion pump.
- Completion of detailed epidural analgesia orders.
- Daily monitoring and adjustment of epidural and infusion pump.
- Twenty-four hour availability/coverage to physically respond to problems/complications.

**3.2** Since postoperative epidural analgesia care represents a level of services above that of routine postoperative pain relief provided by physicians, it is allowed outside the global surgical fee subject to the following reimbursement guidelines.

**TRICARE Reimbursement Manual 6010.61-M, April 1, 2015**

Chapter 1, Section 10

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**4.0 POLICY**

**4.1** Payment of postoperative pain management outside the global surgical fee is only allowed for epidural analgesia care provided and billed by a physician. TRICARE will pay the physician for:

**4.1.1** Insertion of the epidural catheter (CPT procedure codes 62278 and 62279 - epidural, lumbar or caudal, continuous) on the day of the surgery; and

**4.1.2** Daily hospital management of epidural drug administration (CPT procedure code 01996) following the day of surgery (not the day of surgery).

**4.2** The physician is only allowed to bill one pain management procedure code (CPT procedure code 01996) per day. The procedure includes all visits and contacts during the 24-hour time period to adjust the dosage and to maintain a functioning catheter.

**4.3** Daily hospital management of epidural drug administration will be paid up to 3 days following the day of surgery. Additional management services may be allowed at the discretion of the contractor based on best commercial practices.

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