

Pain Management Coding Alert

Reader Question: Code Post-Op Pain With 99231 ... Maybe

Question: Our providers are now doing a different nerve block for postoperative pain management following some knee and shoulder replacements. On saphenous/femoral nerve blocks, instead of just injecting a nerve once (64447), they are inserting a catheter as they would for a continuous infusion (64448). But, since they do not have the pump yet for a continuous infusion, they are just injecting the medication through the catheter. Then they go back approximately every 12 hours (or as needed for pain control) and administer a follow-up (bolus) injection through the catheter. How would you code that?

Wisconsin Subscriber

Answer: As long as there is documentation showing that your provider followed with the patient and managed that epidural, you can bill 99231 (Subsequent hospital care, per day, for the evaluation and management of a patient, which requires at least 2 of these 3 key components: a problem focused interval history; a problem focused examination; and medical decision making that is straightforward or of low complexity...) once daily for follow-up on the femoral catheter. Remember, however, that 99231 cannot be billed for the same date the catheter was placed.