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## Interventional Pain Management

Information on this site is for informational purposes only and does not guarantee coverage or payment. All services must be considered medically necessary and certain services may be subject to additional clinical review criteria. All benefits are subject to the patient's medical coverage agreement including visit, quantity, and/or dollar limits.

The Kaiser Permanente Published Range page was developed to assist in administering plan benefits. For information concerning whether a specific service or benefit is covered, please refer to the patient's medical coverage agreement, the Provider Manual, your Provider contract, or call the Kaiser Permanente Provider Assistance Unit at 1-888-767-4670.

The Kaiser Permanente Published Range page results reflect the range information at the time of the inquiry only. Kaiser Permanente reserves the exclusive right to modify, revoke, suspend or change the Published Ranges, at Kaiser Permanente's sole discretion.

CPT codes deleted by the American Medical Association or HCPC codes deleted by Centers for Medicare & Medicaid Services will remain eligible for payment for valid dates of service for 24 months to allow time for claims submission.

To verify coverage, contracted providers can use the [Eligibility Inquiry tool](#) . Non-contracted providers can contact the Provider Assistance Unit at 1-888-767-4670. To see prior authorization requirements or medical necessity review criteria, see the [Pre authorization Code Check](#) tool.

## Interventional Pain Management Consultations

[Evaluate & Treat – 3 visits or 6 visits \(99214\) Consult Only \(99202\), Second Opinion \(99203\), or Standard Code Range for Procedures included with all Procedure \(non-consultation\)](#)

### Procedure (Referral Reason) Service Ranges:

#### **Arthrocentesis: (20610)**

10004, 10005, 10006, 10007, 10008, 10009, 10010, 10011, 10012, 10021, 10030, 10035, 10036, 10040, 10060, 10061, 10080, 10081, 10120, 10121, 10140, 10160, 10180, 11000, 11001, 11004, 11005, 11006, 11008, 11010, 11011, 11012, 11300, 11301, 11302, 11303, 11305, 11306, 11307, 11308, 11310, 11311, 11312, 11313, 11042, 11043, 11400, 11401, 11402, 11403, 11404, 11406, 11420, 11421, 11422, 11423, 11424, 11426, 11440, 11441, 11442, 11443, 11444, 11446, 17000, 17003, 17004, 17110, 17111, 20552, 20553, 20600, 20604, 20605, 20606, 20610, 20611, 20612, 20615, 23030, 25040, 27096, 99051, 99053, C9290



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### **Discography: (62290)**

62284, 62287, 62290, 62291, 62292, 62320, 62321, 62322, 62323, 62324, 62325, 62326, 62327, 72285, 72295

### **Facet Joint Diagnostic or Medial Branch Injection Diagnostic: (64490)**

64490, 64491, 64492, 64493, 64494, 64495, 0213T, 0214T, 0215T, 0217T, 0218T, 77003

### **Facet Joint Therapeutic or Medial Branch Injection Therapeutic: (64490)**

64490, 64491, 64492, 64493, 64494, 64495, 0213T, 0214T, 0215T, 0217T, 0218T, 77003

### **Facet Neurotomy: (64636)**

64633, 64634, 64635, 64636, 0213T, 0214T, 0215T, 0216T, 0217T, 0218T

### **Genicular Nerve Ablation for Knee Pain (64454)**

64454, 64624, 64640

### **Hip Arthrography or Sacroiliac Injection Procedure: (27095)**

27093, 27095, 27096, 73525, G0259, G0260

### **Kyphoplasty: (22513)**

20983, 22513, 22514, 22515

### **Nerve Block: (64461)**

64461, 64462, 64463, 77003

### **Neurostimulator Surgery: (61885)**

61850, 61860, 61863, 61864, 61867, 61868, 61880, 61885, 61886, 61888, 95970, 95983, 95984, C1820, C1822, L8679, L8688

### **Steroid Epidural Injections: (64483)**

62320, 62321, 62322, 62323, 62324, 62325, 62326, 62327, 64479, 64480, 64483, 64484, 77003

### **Steroid Non-Epidural Injections: (64400)**

20550, 20551, 20552, 20553, 64400, 64405, 64408, 64415, 64416, 64417, 64418, 64420, 64421, 64425, 64430, 64435, 64445, 64446, 64447, 64448, 64449, 64451, 64455, 64486, 64487, 64488, 64489, 64505, 64510, 64517, 64520, 64530, 77003

### **Tendon Sheath Incision for Trigger Finger: (26055)**

20600, 20550, 20551, 20552, 20553, 20604, 20605, 20610, 20611, 26020, 26045, 26055, 26060, 26070, 26075, 26080, 26111, 26113, 26115, 26116, 26117, 26130, 26135, 26140, 26145, 26160, 26170, 26180, 26340, 23650, 26352, 26356, 26357, 26358, 26418, 26420, 26428, 26437, 26440, 26442, 26445, 26449, 26450, 26455, 26460, 26471, 26474, 26476, 26477, 26478, 26479, 26480, 26525, 64702



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Date	Description
03/16/2020	Created
08/11/2021	Removed Termed CPT 95974 95975 from Neurostimulator Surgery
11/30/2021	Added code 20600, 20604, 20605, 20610, 20611, 26020, 26045, 26060, 26070, 26075, 26080, 26111, 26113, 26115, 26116, 26117, 26130, 26135, 26140, 26145, 26160, 26170, 26180, 26340, 23650, 26352, 26356, 26357, 26358, 26418, 26420, 26428, 26437, 26440, 26442, 26445, 26449, 26450, 26455, 26460, 26471, 26474, 26476, 26477, 26478, 26479, 26480, 26525, 64702 to Tendon Sheath Incision for Trigger Finger: (26055).
12/09/2021	Removed 61870 from Neurostimulator Surgery
12/13/2021	Removed 64772, 99152, 99153, 99155, 99156, 99157, G0500 from ESI, Nerve Block or Steroid Injections
12/14/2021	Added 10004, 10005, 10006, 10007, 10008, 10009, 10010, 10011, 10012, 10021, 10022, 10030, 10035, 10036, 10040, 10060, 10061, 10080, 10081, 10120, 10121, 10140, 10160, 10180, 11000, 11001, 11004, 11005, 11006, 11008, 11010, 11011, 11012, 10060, 10061, 10121, 11300, 11300, 11301, 11302, 11303, 11305, 11306, 11307, 11308, 11310, 11311, 11312, 11313, 11042, 11043, 11400, 11401, 11402, 11403, 11404, 11406, 11420, 11421, 11422, 11423, 11424, 11426, 11440, 11441, 11442, 11443, 11444, 11446, 17000, 17003, 17004, 17110, 17111, 20552, 20553, 20612, 20615, 23030, 25040, 27096, 99051, 99053, C9290 to Arthrocentesis.
12/15/2021	Added 20982, 22510, 22511, 22512, 62320, 62321, 62322, 62323, 62324, 62325, 62326 and 62327 to Kyphoplasty.
12/23/2021	Added 62284, 62287, 62292, 62320, 62321, 62322, 62323, 62324, 62325, 62326, 62327, 72285, 72295 to Discography
12/28/2021	Removed, 63650, 63655, 63685, 63688, 64553, 64568, 64569, 64570, 95971, 95972, 95976, 95977, C1767, C1778, C1787, C1816, C1883, C1897, L8680, L8681, L8682, L8683, L8685, L8686, L8687, L8689, L8695. Added 61870, 95970, C1822, L8679
01/18/2022	Removed 22510 22511 22512 from Kyphoplasty and added 22513 22514 22515 62320 62321 62322 62323 62324 62325 62326 62327.
03/21/2022	Reformatted Consultation section added a Standard Procedure Service Range section.
03/29/2022	Added 73525, G0259, G0260 to Hip Arthrography or Sacroiliac Injection Procedure
04/04/2022	Added 20600, 20604, 20605, 20606, 20610, 20611 to Evaluate & Treat – 3 visits or 6 visits.
04/07/2022	Added Missing codes to Eval & treat. Added Missing codes to Standard Code Range for Procedures
05/02/2022	Removed J1442, J1447, J1930, Q5101 and Q5110 from the Eval & Treat and Standard Code Range for Procedures due these now have review requirement.



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05/19/2022	Added J9318, and J9319 to Evaluate & Treat – 3 visits or 6 visits Standard Code Range for Procedures.
06/07/2022	Updated header statement to clarify language around deleted codes.
06/28/2022	Added 0591T, 0592T, 0593T, 96112, 96164, 96165, 96167, 96168, 96170, 96171, A9590, G2058, G2064 to Eval & Treat. Removed L0220, L0622, L0624, L1685, L1755, L1832, L1860, L1904, L1907, L1920, L1950, L1970, L2108, L2128, L3674, L3702, L3740, L3806, L3808, L3906, L3915, L3923, L3961, L3971, L3975, L3978 from Eval & Treat. Removed L0220, L0622, L0624, L1685, L1755, L1832, L1860, L1904, L1907, L1920, L1950, L1970, L2108, L2128, L3674, L3702, L3740, L3806, L3808, L3906, L3915, L3923, L3961, L3971, L3975, L3978 from Standard Code Range for Procedures.
06/30/2022	Added Reason Genicular Nerve Ablation for Knee Pain.
08/15/2022	Added 90736, 90750, 90759, C9088, C9089, C9092 to Evaluate & Treat – 3 visits or 6 visits and Standard Code Range for Procedures section. Added 99424, 99425, 99426, 99427, 99437 to Consult Only, Second Opinion, Evaluate & Treat – 3 visits or 6 visits.
08/18/2022	Updated trigger code from 64450 to 64454 for Genicular Nerve Ablation for Knee Pain. Removed 64450 from Genicular Nerve Ablation for Knee Pain.
12/01/2022	Removed J7336 from Evaluate & Treat – 3 visits or 6 visits and Standard Code Range for Procedures as code now has Review requirement.
01/26/2023	Removed 61870 from Neurostimulator Surgery. Removed 99201 from Consult Only and Second Opinion. Removed Q507, J2791, J2792, C9257 and G2064 from Evaluate & Treat – 3 visits or 6 visits and Standard Code Range for Procedures. Added C9101, C9144, J0134, J0136, J0173, J0283, J0611, J0689, J0701, J0703, J0877, J0891, J0892, J0893, J0898, J0899, J1456, J1574, J1611, J1643, J1954, J2021, J2184, J2247, J2251, J2272, J2281, J2311, J2401, J2402, J3244, J3371, J3372, J9314, J9393, J9394 to Evaluate & Treat – 3 visits or 6 visits and Standard Code Range for Procedures.
03/16/2023	Removed 99239 and 99255 from Evaluate & Treat – 3 visits or 6 visits. Added 99418 and G0318 to Evaluate & Treat – 3 visits or 6 visits.
04/17/2023	Added 15853 15854 99484 99492 99493 99494 and to Evaluate & Treat – 3 visits or 6 visits. Added J7169 to Evaluate & Treat – 3 visits or 6 visits and Standard Code Range for Procedures.
05/10/2023	Added 86328, 86408, 86409, 86413, 86769, 87426, 87428, 87635, 87636, 87637, 87811, 87913, 91300, 91301, 91302, 91303, 91304, 91305, 91306, 91307, 91308, 91309, 91310, 91311, 91312, 91313, 91314, 91315, 91316, 91317, 0001A, 0002A, 0003A, 0004A, 0011A, 0012A, 0013A, 0021A, 0022A, 0031A, 0034A, 0041A, 0042A, 0044A, 0051A, 0052A, 0053A, 0054A, 0064A, 0071A, 0072A, 0073A, 0074A, 0081A, 0082A, 0083A,



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	0091A, 0092A, 0093A, 0094A, 0104A, 0111A, 0112A, 0113A, 0124A, 0134A, 0144A, 0154A, 0164A, 0173A, 0174A, 0202U, 0223U, 0224U, 0225U, 0226U, 0240U, 0241U, C1943, C9803, D0604, D0605, D0606, D1701, D1702, D1703, D1704, D1705, D1706, D1707, D1708, D1709, D1710, D1711, D1712, D1713, D1714, G2023, G2024, J0612, J0613, J2403, J9196, J9294, J9296, J9297, M0201, M0249, M0250, Q0249, U0001, U0002, U0003, U0004, U0005 to Evaluate & Treat – 3 visits or 6 visits and Standard Code Range for Procedures. Removed J2400 and J9044 from Evaluate & Treat – 3 visits or 6 visits and Standard Code Range for Procedures.
05/22/2023	Removed J9041 from Evaluate & Treat – 3 visits or 6 visits and Standard Code Range for Procedures.
06/02/2023	Removed 91300, 91301, 91305, 91306, 91307, 91308, 91309, 91311, 0001A, 0002A, 0003A, 0004A, 0011A, 0012A, 0013A, 0051A, 0052A, 0053A, 0054A, 0064A, 0071A, 0072A, 0073A, 0074A, 0081A, 0082A, 0083A, 0091A, 0092A, 0093A, 0094A, 0111A, 0112A, 0113A, J9318 and J9319 from Evaluate & Treat – 3 visits or 6 visits and Standard Code Range for Procedures section. Added 0121A, 0141A, 0142A, 0151A, 0171A, 0172A Evaluate & Treat – 3 visits or 6 visits and Standard Code Range for Procedures section.
06/09/2023	Removed reasons Consult Only, Second Opinion Eval & treat sections and Standard Code Range for Procedures. Added link for list of codes for Consult Only, Second Opinion Eval & treat and Standard Code Range for Procedures
08//14/2023	Removed ESI, Nerve Block or Steroid Injections reason. Added new reasons Facet Joint Diagnostic or Medial Branch Injection Diagnostic, Facet Joint Therapeutic or Medial Branch Injection Therapeutic, Nerve Block, Steroid Epidural Injections and Steroid Non-Epidural Injections.
02/07/2024	Added 73525, G0259 and G0260 to Hip Arthrography or Sacroiliac Injection Procedure.
03/01/2024	Removed 73525, G0259, G0260 from Kyphoplasty.