

Anesthesia for Pain Management Injections – Commercial (Updated)

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According to the American Society of Anesthesiologists and the International Spine Intervention Society, minor pain management procedures require only local anesthesia under most routine circumstances, these include:

- Epidural steroid injections
- Epidural blood patch
- Trigger point injections
- Sacroiliac joint injections
- Bursal injections
- Occipital nerve block
- Facet injections

General anesthesia and moderate sedation services (CPT codes 00300, 00400, 00600, 01935-01936, 01991-01992, 99152-99153, 99156-99157) billed with pain management services (CPT codes 20552, 20553, 27096, 62273, 62320-62323, 64405, 64479, 64480, 64483, 64484, 64490-64495, 0228T, 0229T, 0230T, 0231T, G0260) for a patient age 18 or older will be denied. The ASA Committee notes that when conscious sedation is provided during the performance of a pain procedure, the patient should be responsive during critical portions of the pain management therapy. For a limited number of patients, a second provider may be required to manage moderate or deep sedation, or in select cases, other anesthesia services during the interventional pain therapy. As such, the pain management therapies described above are not considered typical primary procedures to warrant the use of deep sedation or anesthesia. However, providers may appeal with medical documentation to substantiate the need to use general anesthesia and moderate sedation in addition to the local anesthesia.