



**POSTOPERATIVE DISPOSABLE AMBULATORY
REGIONAL ANESTHESIA (PDARA)
HS-011**



Harmony Behavioral Health, Inc.

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**Postoperative Disposable
Ambulatory Regional
Anesthesia (PDARA)**

Policy Number: HS-011

Original Effective Date: 12/6/2007

**Revised Date(s): 5/15/2009; 5/28/2010;
7/18/2011; 5/3/2012**

DISCLAIMER

The Clinical Coverage Guideline is intended to supplement certain standard WellCare benefit plans. The terms of a member's particular Benefit Plan, Evidence of Coverage, Certificate of Coverage, etc., may differ significantly from this Coverage Position. For example, a member's benefit plan may contain specific exclusions related to the topic addressed in this Clinical Coverage Guideline. When a conflict exists between the two documents, the Member's Benefit Plan always supersedes the information contained in the Clinical Coverage Guideline. Additionally, Clinical Coverage Guidelines relate exclusively to the administration of health benefit plans and are NOT recommendations for treatment, nor should they be used as treatment guidelines. The application of the Clinical Coverage Guideline is subject to the benefit determinations set forth by the Centers for Medicare and Medicaid Services (CMS) National and Local Coverage Determinations and state-specific Medicaid mandates, if any.

APPLICATION STATEMENT

The application of the Clinical Coverage Guideline is subject to the benefit determinations set forth by the Centers for Medicare and Medicaid Services (CMS) National and Local Coverage Determinations and state-specific Medicaid mandates, if any.

BACKGROUND

Over 50% of all surgeries are performed on an ambulatory or outpatient basis, but poor management of postoperative pain may delay discharge or lead to hospital readmission. Although oral analgesics, such as opioids, are effective, they can cause undesirable side effects such as nausea, vomiting, sedation, pruritis or insomnia. In an effort to improve pain control during the postoperative period, disposable pumps have been developed that infuse anesthesia continuously to a specific region of the body, providing local pain relief. This technique involves the infusion of anesthesia into a surgical wound or perineural tissue using a catheter connected to an elastomeric or spring-loaded disposable pump. In a typical case, the pump delivers an anesthetic, such as ropivacaine or bupivacaine, for 2 days, while the patient is at home. After the infusion is completed, the patient, or a properly instructed caregiver, removes the catheter, eliminating the need for transport of the patient to the hospital or clinic. Postoperative disposable ambulatory regional anesthesia (PDARA) has been used to manage pain after a variety of outpatient surgical procedures, with catheter placement dependent on the site of surgery.

Clinical evidence supports the use of disposable ambulatory regional anesthesia for the management of postoperative pain for spinal fusion, inguinal hernia repair, and shoulder, knee, or foot surgery. Disposable ambulatory regional anesthesia should be used in conjunction with appropriate conventional pain management techniques, such as oral analgesics or intravenous (IV) morphine, since it has been established as an adjunct to but not a replacement for conventional postoperative pain management.

Clinical evidence does not support the use of disposable ambulatory regional anesthesia for the management of postoperative pain control for procedures other than those listed above. Further studies involving larger numbers of participants are needed to conclude that disposable pumps to infuse anesthesia into a surgical wound or perineural tissue are a safe and effective method of postoperative pain management for procedures other than spinal fusion, inguinal hernia repair, and shoulder, knee, or foot surgery.

Complications associated with postoperative disposable ambulatory regional anesthesia are generally minor and easily managed. Complications may include abnormal sensations such as pain, tingling, or total sensation loss; dislodgement or accidental early removal of catheters; pump failure; and inability to establish a nerve block. Since these devices are ambulatory, patients may be discharged with their pain pumps in place. Potential complications include surgical wound infection and leakage of medication into surrounding tissue.

A number of disposable pumps used for postoperative ambulatory regional anesthesia are commercially available. These include but are not limited to the following: Accufuser™ Plus (McKinley Medical, Wheat Ridge, CO), Delivery of Anesthesia for Postoperative Pain Control by Elastomeric Infusion Pump, Eysypump, ON-Q® Soaker Post-Operative Pain Relief System and C-Bloc Continuous Peripheral Nerve Block System™ (I-Flow Corp, Lake Forest, CA), Freedom Infusion System, Hospira Gemstar® (Hospira Inc.), Homepump, Intralesional Anesthetic Pumps, Intra-Joint Disposable Pain Pump, Go Medical Ballon Infusion System P.O.P. Pain Kit, Pain Mate, Stryker PainPump® Pain Care 3000, 3200, 4200.

Hayes Rating (2009)

A rating of B was given for postoperative disposable ambulatory regional anesthesia (PDARA) as an adjunct to conventional strategies for the management of postoperative pain following inguinal hernia repair, cesarean delivery or shoulder, knee, or foot surgery.

A rating of C was given for PDARA as an adjunct to conventional strategies for the management of postoperative pain following spinal fusion, hip surgery, mastectomy, axillary lymph node dissection, appendectomy, gastric banding or bypass, cardiac surgery, or nephrectomy. This rating reflects the limited or conflicting evidence regarding the efficacy of PDARA for these conditions.

A rating of D was given for PDARA as an adjunct to conventional strategies for the management of postoperative pain after abdominal hysterectomy, prostatectomy, gynecologic surgery via laparotomy, or any surgical procedure other than those listed previously. This Rating reflects the lack of evidence regarding the efficacy of PDARA for these conditions.

POSITION STATEMENT

Postoperative Disposable Ambulatory Regional Anesthesia (PDARA) delivered via ambulatory infusion pump **is considered medically necessary** for the management of postoperative pain related to the following surgical procedures:

- Spinal fusion; **OR**,
- Inguinal hernia repair; **OR**,
- Shoulder surgery; **OR**,
- Knee surgery; **OR**,
- Foot surgery

Postoperative Disposable Ambulatory Regional Anesthesia (PDARA) **is considered experimental and investigational and NOT a covered benefit** for the management of postoperative pain related to the following surgical procedures:

- Hip surgery; **OR**,
- Open-heart surgery; **OR**,
- Cesarean surgery; **OR**,
- Abdominal hysterectomy; **OR**,
- Any other procedure not listed as medically necessary above

CODING

CPT® Codes No applicable codes

ICD-9-CM Procedure Codes No applicable codes

HCPCS

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

ICD-9-CM Diagnosis Codes - This list of diagnosis codes may not be all inclusive.

The following diagnosis codes meet medical necessity for the management of postoperative pain related to the spinal fusion, inguinal hernia repair, shoulder surgery, knee surgery or foot surgery.

Status Post Spinal Fusion for:

170.2	Malignant neoplasm of vertebral column, excluding sacrum and coccyx
192.3	Malignant neoplasm of spinal meninges
198.3	Secondary malignant neoplasm of brain and spinal cord
198.4	Secondary malignant neoplasm of other parts of nervous system
198.5	Secondary malignant neoplasm of bone and bone marrow
225.3	Benign neoplasm of spinal cord
225.4	Benign neoplasm of spinal meninges
237.5	Neoplasm of uncertain behavior of brain and spinal cord
237.6	Neoplasm of uncertain behavior of meninges

238.0	Neoplasm of uncertain behavior of bone and articular cartilage
724.02	Spinal stenosis, lumbar region
733.13	Pathologic fracture of vertebrae
733.82	Nonunion of fracture
737.30 - 737.39	Kyphoscoliosis and scoliosis
737.42	Lordosis, curvature of spine associated with other conditions
738.4	Acquired spondylolisthesis
756.12	Spondylolisthesis
805.4 - 805.5	Fracture of vertebral column without mention of spinal cord injury, lumbar
806.4 - 806.5	Fracture of vertebral column with spinal cord injury, lumbar
839.20	Dislocation of lumbar vertebra, closed
839.30	Dislocation of lumbar vertebra, open

Status Post Hernia Repair for:

550.10	Inguinal hernia unilateral or unspecified with obstruction, without gangrene; not recurrent
550.11	Inguinal hernia unilateral or unspecified with obstruction, without gangrene; recurrent
550.12	Inguinal hernia bilateral with obstruction, without gangrene; not recurrent
550.13	Inguinal hernia bilateral with obstruction, without gangrene; recurrent
550.90	Inguinal hernia unilateral without obstruction or gangrene; not recurrent
550.91	Inguinal hernia unilateral without obstruction or gangrene; recurrent
550.92	Inguinal hernia bilateral without obstruction or gangrene; not recurrent
550.93	Inguinal hernia bilateral without obstruction or gangrene; recurrent

Status Post Shoulder Surgery for:

718.11	Loose Body in Shoulder Region
718.31	Recurrent Dislocation of Shoulder
718.81	Other Joint Derangement Shoulder
726.0	Adhesive Capsulitis of Shoulder; Frozen shoulder
726.10	Disorders of bursae and tendons in shoulder region; Rotator Cuff Syndrome; Tear
726.2	Other affections of shoulder region; Scapulohumeral fibrositis, Periarthritis of Shoulder
727.60	Nontraumatic Rupture of Unspecified Tendon
727.61	Complete Rupture of Rotator Cuff
831.00	Closed Dislocation of Shoulder
831.10	Open Dislocation of Shoulder
840.4	Traumatic Rotator Cuff Tear
880.00	Open Wound of Shoulder without mention of complication
880.10	Open Wound of Shoulder with complication
880.20	Open Wound of Shoulder with tendon involvement
955.9	Traumatic Injury to Nerve of Shoulder Girdle
959.2	Traumatic Injury Shoulder

Status Post Knee Surgery for:

711.87	Arthropathy associated with other infectious and parasitic diseases
715.96	Osteoarthritis of Knee
717.40 - 717.49	Derangement of lateral meniscus; Bucket Handle Tear; Anterior Horn; Posterior Horn; Other
717.6	Loose Body in Knee
717.7	Chondromalacia of patella
717.81 - 717.89	Derangement of Knee; Lateral Collateral Ligament; Medial Collateral Ligament; ACL ; PCL; Other
717.9	Other Internal Derangement of Knee
718.36	Recurrent Dislocation of Knee
719.26	Villonodular Synovitis

727.09	Synovitis and Tenosynovitis of Knee
733.81	Malunion fracture
733.82	Non-union fracture
822.0 - 822.1	Fracture Patella; Closed; Open
836.2	Dislocation of Knee; Tear of cartilage or meniscus; Current
891.0	Open Wound of Knee without mention of complication
891.1	Open Wound of Knee with complication
891.2	Open Wound of Knee with tendon involvement
959.7	Traumatic Injury of Knee
V43.65	Replacement Knee Joint

Status Post Foot Surgery for:

355.5	Tarsal tunnel syndrome
715.97	Osteoarthritis, unspecified whether generalized or localized; Foot
716.17	Traumatic arthropathy; Foot
718.07	Articular Cartilage Disorder; Foot
718.17	Loose body in joint; Foot
718.87	Other Joint Derangement, NEC; Foot; Hyperextension
719.27	Villonodular Synovitis; Foot
727.06	Tenosynovitis of foot
736.70	Other Acquired Deformity of Foot
755.67	Anomalies of Foot NEC; Hypertrophy of foot
825.00 - 825.39	Fracture of foot; Tarsal; Metatarsal Bones; Closed
892.0 - 892.2	Wound, open foot w/ tendon involvement
959.7	Traumatic Injury to Foot

*Current Procedural Terminology (CPT) 2012 American Medical Association: Chicago, IL.®©

REFERENCES

Peer Reviewed

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Government Agencies, Professional and Medical Organizations

1. American Society of Anesthesiologists. (2004). Practice guidelines for acute pain management in the perioperative setting: an updated report by the American Society of Anesthesiologists Task Force on Acute Pain Management. *Anesthesiology*, 100(6), 1573-1581.

Other

1. UnitedHealthcare Technology Assessment. (2008, March 20). Postoperative disposable ambulatory regional anesthesia.

HISTORY AND REVISIONS

Date	Action
5/3/2012	• Approved by MPC. Added Hayes ratings.
12/1/2011	• New template design approved by MPC.
7/18/2011	• Approved by MPC.