

NOPAIN ACT FINAL RULING

Effective January 1, 2025, the Avanos ON-Q* elastomeric infusion pump and the Avanos ambIT* disposable electronic infusion pump meet qualifying requirements and are eligible for separate payment under the NOPAIN Act as outlined in the 2025 Hospital Outpatient Prospective Payment and Ambulatory Surgical Center Payment System Final Rule¹

- The NOPAIN Act (Non-Opioids Prevent Addiction in the Nation) was enacted to address gaps in pain management during the opioid epidemic by expanding access to clinically proven non-opioid alternatives for surgical patients in the Hospital Outpatient Department (HOPD) and Ambulatory Surgery Center (ASC) settings for Medicare beneficiaries through December 31, 2027.

The NOPAIN Act improves patient access to ON-Q and ambIT infusion pumps for post-surgical pain management by providing separate reimbursement for these devices when deemed medically necessary. This eliminates financial barriers that may exist when the cost of the infusion pump is bundled into the payment for a covered surgical procedure.

- The NOPAIN Act requires Centers for Medicare and Medicaid (CMS) to unbundle Medicare Part B payments for qualified non-opioid treatments in HOPD and ASC settings. This ensures that facilities receive separate payment for qualified non-opioid treatments without reducing the payment for the associated surgical procedures, and patients have greater access to these treatments.



The ON-Q and ambIT infusion delivery systems received unique HCPCS codes for separate payment in the HOPD and ASC settings.

The payment limitation, set by CMS, for ON-Q and ambIT infusion pumps is up to \$2,284.98. Actual payment to the facility for ON-Q and ambIT pumps and all disposable supplies is based on the facility's charges adjusted to cost when provided to treat pain after a covered surgical procedure.

The new unique HCPCS code C9804 for ON-Q and HCPCS code C9806 for ambIT can be used on claim submissions beginning January 1, 2025.

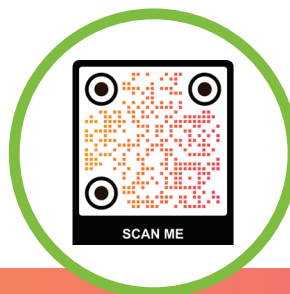


Brand Name (HCPCS Code)	HCPCS Code	Long Descriptor	Payment Limit Amount
ON-Q Pump	(C9804)	Elastomeric infusion pump (e.g., ON-Q Pump with Bolus), including catheter and all disposable system components, non-opioid medical device (must be a qualifying Medicare non-opioid medical device for post-surgical pain relief in accordance with Section 4135 of the CAA, 2023)	Up to \$2,284.98
ambIT Electronic Infusion Pump	(C9806)	Rotary peristaltic infusion pump (e.g., ambIT Pump), including catheter and all disposable system components, non-opioid medical device (must be a qualifying Medicare non-opioid medical device for post-surgical pain relief in accordance with Section 4135 of the CAA, 2023)	Up to \$2,284.98

Payment Status Indicators are assigned by CMS to HCPCS codes to describe how services, procedures and supplies are paid by CMS when qualifying criteria are met. The following indicators were assigned to the new ON-Q and ambIT pump HCPCS codes:

HOPD Payment Indicator: H1: - Non-Opioid Medical Devices For Post-Surgical Pain Relief Paid under OPPS; separate payment based on hospital's charges adjusted to cost. Subject to criteria and payment limitation under Section 4135 of the CAA, 2023.

ASC Payment Indicator:
L6 - Special payment; New Technology Intraocular Lens (NTIOL) or qualifying non-opioid devices.



To learn more about ON-Q and ambIT coverage under the NOPAIN Act, **scan the QR code.**

For more information on the NOPAIN Act, contact our Market Access and Reimbursement Team at reimbursement@avanos.com.

AVANOS*

¹Medicare Hospital Outpatient Prospective Payment System (OPPS) and the Medicare Ambulatory Surgical Center (ASC) payment system for calendar year 2025, <https://public-inspection.federalregister.gov/2024-25521.pdf>

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