

Prior Authorization Requirements Updated & Pain Injections

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Group Health Cooperative of Eau Claire has updated its Prior Authorization (PA) policy on Pain Injections.

The following procedures will require prior authorization:

- 1. Non-pulsed (thermal) radiofrequency ablation (RFA) [facet neurotomy, facet rhizotomy, or articular rhizolysis] (64633-64636)
- 2. Facet joint injection (zygapophysial joint injection, or medial branch block) (64490-64495)
- 3. Destruction by neurolytic agent (64600-64632 and 64640-64681)
- 4. Peripheral nerve blocks (64400-64450) that are not for acute post-operative pain control
- 5. Intercostal nerve block (64420-64421)

Procedures listed as experimental/investigational are not covered because there is insufficient evidence in the literature to support medical necessity.

- 1. Cryoablation facet joint (64999): Experimental/investigational
- 2. Cryoablation of the intercostal nerve (64620): Experimental/investigational
- 3. Laser ablation (64999): Experimental/investigational
- 4. Chemical neurolysis (ablation): Experimental/investigational
- 5. Radiofrequency ablation (RFA) of hip or sacroiliac (SI) joint or intercostal nerve : Experimental/investigational
- 6. Cooled radiofrequency ablation (RFA) (64999): Experimental/investigational
- 7. Pulsed radiofrequency ablation (RFA) (64999): Experimental/investigational
- 8. Cluneal nerve block (64450): Experimental/investigational
- 9. Genicular nerve block (64450): Experimental/investigational
- 10. Obturator nerve block for treatment of chronic pain (64450): Experimental/investigational
- 11. Suprascapular nerve block (64418): Experimental/investigational
- 12. Occipital nerve block (64405): Experimental/investigational
- 13. Coccygeal ganglion block (64520): Experimental/investigational
- 14. Celiac plexus block (64530): Experimental/investigational

Peripheral Nerve Blocks that do not require PA:

The following nerve blocks do not require a PA:

Femoral nerve blocks for acute post-operative pain after knee replacement surgery or herniorrhaphy **Steroid injections of the SI (sacroiliac) joint (27096) or other joints (206XX and 205XX) **do not** require PA. **Epidural injections (62320-62327, 64479-64480, 64483-64484) **do not** require PA.

If you have any questions or concerns, please contact Provider Relations at (715) 552-4300.