

# Children's Hospital and Health System Children's Community Health Plan Policy and Procedure

This policy applies to the following entity(s):

- |  |  |
|--|--|
| <input type="checkbox"/> CHW – Milwaukee                         | <input type="checkbox"/> CHW - Fox Valley                            |
| <input type="checkbox"/> CHHS Foundation                         | <input type="checkbox"/> CHW - Surgicenter                           |
| <input type="checkbox"/> CHW – Community Services Division       | <input checked="" type="checkbox"/> Children's Community Health Plan |
| <input type="checkbox"/> Children's Medical Group - Primary Care | <input type="checkbox"/> Children's Specialty Group                  |
| <input type="checkbox"/> Children's Medical Group - Urgent Care  | <input type="checkbox"/> CHHS Corporate Departments                  |

## Medical Utilization Management Policy

### SUBJECT: FACET JOINT INJECTIONS (A.K.A. MEDIAL BRANCH BLOCKS)

#### INCLUDED PRODUCT(S):

##### Medicaid

BadgerCare Plus

Care4Kids Program

##### Commercial

Together with CCHP

##### Marketplace

Together with CCHP

#### PURPOSE OR DESCRIPTION:

The purpose of this policy is to define criteria for the medically necessary use of facet joint injections for cervical and lumbar spinal pain. These injections are typically used as a trial procedure to determine if a therapeutic benefit is likely from a facet neurotomy by radiofrequency nerve ablation done at the same level.

#### POLICY:

CCHP policy will follow Milliman Careweb policy with one exception: CCHP policy will require a trial and failure of 3 months' or more nonoperative management in **one** of three areas (not all three as in Careweb): Exercise program; pharmacotherapy; physical or spinal manipulation therapy. As such, CCHP policy is as follows:

1. Facet joint injection may be indicated when **ALL** of the following are present:
  - a. Diagnostic medial branch nerve block is needed to confirm facet joint as source of spinal pain.
  - b. Patient is candidate for facet neurotomy,<sup>[A]</sup> as indicated by **ALL** of the following:

Effective: 5/16

Reviewed:

Revised:

Developed by: CCHP Medical Director and Director Health Plan Clinical Services

- i. Chronic spinal pain (at least 3 months' duration) originating from **1 or more** of the following:
  - Neck (eg, following whiplash injury)
  - Low back
- ii. Failure of 3 months or more of nonoperative management, as indicated by **ONE** of the following:
  - Exercise program
  - Pharmacotherapy
  - Physical therapy or spinal manipulation therapy
- iii. Imaging studies have ruled out other causes of spinal pain (eg, herniated disk, spinal stenosis, fracture, tumor).
- iv. Limited number of prior facet neurotomies, as indicated by **1 or more** of the following:
  - No prior history of facet neurotomy
  - Prior history of not more than a series of 3 successful single or multilevel facet neurotomies, each providing at least 6 months or more of pain relief in same region (eg, neck or back)
- c. No coagulopathy
- d. No current infection

#### **REFERENCES:**

1. Falco FJ, et al. An updated review of the diagnostic utility of cervical facet joint injections. *Pain Physician* 2012;15(6):E807-38.
2. Manchikanti L, Singh V, Falco FJ, Cash KM, Fellows B. Cervical medial branch blocks for chronic cervical facet joint pain: a randomized, double-blind, controlled trial with one-year follow-up. *Spine* 2008;33(17):1813-20. DOI: 10.1097/BRS.0b013e31817b8f88.
3. Kirpalani D, Mitra R. Cervical facet joint dysfunction: a review. *Archives of Physical Medicine and Rehabilitation* 2008;89(4):770-4. DOI: 10.1016/j.apmr.2007.11.028.
4. Milliman Careweb Guidelines, Guideline A-0695, Facet Joint Injection. Copyright © 2016 MCG Health, LLC. All Rights Reserved