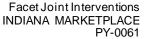
REIMBURSEMENT POLICY STATEMENT





Effective Date: 11/01/2020

- II. Medial Branch Nerve Block Injections
 - A. Up to two medial branch nerve block injections in the cervical/thoracic or lumbar regions are considered medically necessary.
 - 1. Only three (3) spinal levels (unilateral or bilateral) may be treated at the same time (maximum amount of six injections per rolling 12 months);
 - 2. A response of at least 50% pain relief must be achieved before the second injection is performed; and
 - 3. Injections should be at least two (2) weeks apart.
 - 4. Maximum number of benefit limits in this policy are based on medial necessity.
 - 5. The member must meet the medically necessary criteria in the corresponding Facet Joint Interventions medical policy, before a diagnostic injection is performed.
- III. Per CPT guidelines, imaging guidance and any injection of contrast are inclusive components of all facet medial branch nerve blocks and are not reimbursed separately.

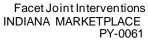
IV. Radiofrequency Facet Ablation

- A. Radiofrequency Facet Ablations are considered medically necessary when the member meets ALL of the medically necessary criteria in the corresponding Facet Joint Interventions medical policy.
- B. A maximum of four (4) radiofrequency facet ablations per rolling twelve (12) months (two left and two right per spinal region: cervical, thoracic or lumbar).
- C. Repeat Radiofrequency Facet Ablation in the same spinal region and side is considered medically necessary when ALL of the criteria in the corresponding Facet Joint Interventions medical policy has been met.

V. Sedation

- A. Neither conscious sedation nor Monitored Anesthesia Care (MAC) is routinely necessary for intra-articular facet joint injections or medial branch blocks and are not routinely reimbursable.
 - Individual consideration may be given for payment in rare unique circumstances if the medical necessity of sedation is unequivocal and clearly documented.





Effective Date: 11/01/2020

F. Related Policies/Rules

Facet Joint Interventions Medical Policy

G. Review/Revision History

| 05/13/2020 | This policy replaces the Facet Medial Branch Nerve Block and Radiofrequency Facet Ablation policies. |
|------------|---|
| 07/22/2020 | Revisions: Medial Branch Nerve Block injection clinical criteria; requirement of one "successful" RFA session. |
| 11/11/2020 | Revision: RFA language revised around benefit limit for clarity. (This revision does not require a network notification or a change of the Effective Date). |
| 11/01/2020 | |
| 05/31/2022 | |

