



# CLINICAL GUIDELINES

## CMM-207: Epidural Adhesiolysis

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## **CMM-207: Epidural Adhesiolysis**

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## **CMM-207.1: Definition**

“**Epidural adhesiolysis**” is also known as epidural neurolysis, epidural decompressive neuroplasty, and Racz neurolysis. It is defined as a treatment for back pain that involves disruption, reduction, and/or elimination of fibrous tissue from the epidural space, which is carried out by either catheter manipulation or the injection of saline or other adhesiolytic agents. A catheter is used to enter the epidural space through a caudal, interlaminar, or transforaminal approach. The goal is to free the nerve root of adhesions and allow introduction of medications to the affected nerve root. An anesthetic along with a glucocorticosteroid may also be injected as part of the procedure. These procedures may also involve spinal endoscopy to visually address the adhesions.

## **CMM-207.2: General Guidelines**

There is insufficient scientific evidence to support the use of epidural adhesiolysis, performed by catheter or endoscopically, as a treatment for back pain. It is considered experimental, investigational or unproven.

## **CMM-207.3: Procedure (CPT®) Codes**

This guideline relates to the CPT® code set below. Codes are displayed for informational purposes only. Any given code’s inclusion on this list does not necessarily indicate prior authorization is required.	
<b>CPT®</b>	<b>Codes Considered Experimental, Investigational or Unproven</b>
<b>62263</b>	Percutaneous lysis of epidural adhesions using solution injection (eg, hypertonic saline, enzyme) or mechanical means (e.g., catheter) including radiologic localization (includes contrast when administered), multiple adhesiolysis sessions; 2 or more days
<b>62264</b>	Percutaneous lysis of epidural adhesions using solution injection (e.g., hypertonic saline, enzyme) or mechanical means (e.g., catheter) including radiologic localization (includes contrast when administered), multiple adhesiolysis sessions; 1 day
<b>62280</b>	Injection/infusion of neurolytic substance (e.g., alcohol, phenol, iced saline solutions), with or without other therapeutic substance; subarachnoid
<b>62281</b>	Injection/infusion of neurolytic substance (e.g., alcohol, phenol, iced saline solutions), with or without other therapeutic substance; epidural, cervical or thoracic
<b>62282</b>	Injection/infusion of neurolytic substance (e.g., alcohol, phenol, iced saline solutions), with or without other therapeutic substance; epidural, lumbar, sacral (caudal)
This list may not be all inclusive and is not intended to be used for coding/billing purposes. The final determination of reimbursement for services is the decision of the health plan and is based on the individual’s policy or benefit entitlement structure as well as claims processing rules.	

## CMM-207.4: References

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