



CLINICAL GUIDELINES

CMM-207: Epidural Adhesiolysis

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VERSION 1.0.2026

EviCore

By ~~EVERNORTH~~

EviCore healthcare Clinical Decision Support Tool Diagnostic Strategies: This tool addresses common symptoms and symptom complexes. Imaging requests for individuals with atypical symptoms or clinical presentations that are not specifically addressed will require physician review. Consultation with the referring physician, specialist, and/or individual's Primary Care Physician (PCP) may provide additional insight.

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Table of Contents

Guideline	Page
Definitions.....	3
General Guidelines.....	5
Non-Indications.....	7
Codes (CMM-207).....	9
References (CMM-207).....	11

Definitions

Guideline	Page
Definitions.....	4

Definitions

CMM.PN.DF.207**v1.0.2026**

**Epidural Adhesiolysis
(also known
as epidural
neurolysis, epidural
decompressive
neuroplasty, and Racz
neurolysis)**

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.

General Guidelines

Guideline	Page
General Guidelines.....	6

General Guidelines

CMM.PN.GG.207**v1.0.2026**

Health Equity Considerations

Health equity is the highest level of health for all individuals; health inequity is the avoidable difference in health status or distribution of health resources due to the social conditions in which individuals are born, grow, live, work, and age. Social determinants of health are the conditions in the environment that affect a wide range of health, functioning, and quality of life outcomes and risks. Examples include the following: safe housing, transportation, and neighborhoods; racism, discrimination, and violence; education, job opportunities, and income; access to nutritious foods and physical activity opportunities; access to clean air and water; and language and literacy skills.

Non-Indications

Guideline	Page
Non-Indications.....	8

Non-Indications

CMM.PN.NI.207

v1.0.2026

Experimental, Investigational, or Unproven (EIU)

Epidural adhesiolysis (performed by catheter or endoscopically), as a treatment for back pain, is considered **experimental, investigational, or unproven** based on the lack of conclusive scientific evidence demonstrating clinical efficacy.

Codes (CMM-207)

Guideline	Page
Codes (CMM-207).....	10

Codes (CMM-207)

CMM.PN.PC.207**v1.0.2026**

The inclusion of any code in this table does not imply that the code is under management or requires prior authorization. Refer to the applicable health plan for management details. Prior authorization of a code listed in this table is not a guarantee of payment. The Certificate of Coverage or Evidence of Coverage policy outlines the terms and conditions of the member's health insurance policy.

Code	Code Description/Definition
62263	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; 2 or more days
62264	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
62280	Injection/infusion of neurolytic substance (e.g., alcohol, phenol, iced saline solutions), with or without other therapeutic substance; subarachnoid
62281	Injection/infusion of neurolytic substance (e.g., alcohol, phenol, iced saline solutions), with or without other therapeutic substance; epidural, cervical or thoracic
62282	Injection/infusion of neurolytic substance (e.g., alcohol, phenol, iced saline solutions), with or without other therapeutic substance; epidural, lumbar, sacral (caudal)

CMM-207: Epidural Adhesiolysis

References (CMM-207)

Guideline	Page
References (CMM-207).....	12

References (CMM-207)

CMM.PN.RF.207

v1.0.2026

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