

Cigna Musculoskeletal Program Dorsal Column Spinal Cord Stimulator/Intrathecal Pump Frequently Asked Questions

Note: Prior authorization requests should *only* include those codes for the current surgical treatment plan and *not* codes for every contingency surgical treatment plan. Should additions, deletions and/or other changes be required for a current authorization, please contact eviCore to provide supporting documentation for review of the medical necessity of requested additions, deletions and/or other changes.

When can I perform a spinal cord stimulator (SCS) trial and when can I perform a permanently implanted spinal cord stimulator?

A short-term trial of a dorsal column SCS is considered medically necessary for the treatment of chronic, intractable pain secondary to **either** a) failed back syndrome (FBS) with intractable neuropathic leg pain, or b) complex regional pain syndrome (CRPS)/reflex sympathetic dystrophy (RSD) with:

- 1. Failure of at least six consecutive months of physician-supervised conservative medical management (e.g., pharmacotherapy, physical therapy, cognitive therapy, or activity lifestyle modification).
- 2. Surgical intervention is not indicated.
- 3. An evaluation by a mental health provider (e.g., a face-to-face assessment with or without psychological questionnaires or psychological testing) reveals no evidence of an inadequately controlled mental health problem (e.g., alcohol or drug dependence, depression, or psychosis) that would negatively impact the success of a SCS or contraindicate its placement.

Permanent implantation of a dorsal SCS is considered medically necessary for the treatment of chronic, intractable pain secondary to **either** a) failed back syndrome (FBS) with intractable neuropathic leg pain or b) complex regional pain syndrome (CRPS)/reflex sympathetic dystrophy (RSD) with:

- 1. Failure of at least six consecutive months of physician-supervised conservative medical management (e.g., pharmacotherapy, physical therapy, cognitive therapy, or activity lifestyle modification),
- 2. Surgical intervention is not indicated,
- 3. An evaluation by a mental health provider (e.g., a face-to-face assessment with or without psychological questionnaires or psychological testing) reveals no evidence of an inadequately controlled mental health problem (e.g., alcohol or drug dependence, depression, or psychosis) that would negatively affect the success of an SCS or contraindicate its placement, and
- 4. At least a 50 percent reduction in pain has been demonstrated during a short-term trial of SCS.

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When can I perform an intrathecal pump?

The use of an implantable intrathecal or epidural drug delivery system is considered medically necessary for 1) nonmalignant, chronic intractable pain (e.g., failed back surgery syndrome with low back pain or radicular pain, complex regional pain syndrome (i.e., reflex sympathetic dystrophy), and post-herpetic neuralgia), 2) severe, refractory spasticity or chronic intractable dystonia in individuals who are unresponsive to or cannot tolerate oral anti-spasticity agents (i.e., baclofen [Lioresal®]) (i.e., intrathecal injection of baclofen), or 3) cancer-related pain.

A trial with a percutaneous intrathecal or epidural drug delivery system for nonmalignant chronic intractable pain is considered medically necessary when **all** of the following criteria have been met:

- 1. There is a documented pathology (i.e., an objective basis for the pain complaint),
- Failure of a sufficient trial of at least six months of all reasonable treatment options for pain management that could potentially provide benefit with a reasonable expectation that the treatment could possibly render the need for the intrathecal pain pump medically unnecessary,
- 3. Participation in a reasonable trial of aggressive active rehabilitative exercises,
- 4. Failure of a sufficient trial of strong opioids or other analgesics in adequate doses, with a fixed schedule (not on an as-needed basis) dosing,
- 5. Further surgical intervention or other treatment is not indicated or likely to be effective, and
- 6. Statement from a primary care physician, neurologist, physiatrist, psychiatrist, psychologist, or other licensed behavioral or medical health care professional attesting to the absence of untreated, underlying mental health conditions or issues (e.g., depression, or drug or alcohol abuse) as a major contributor to chronic pain.

A trial with a percutaneous intrathecal drug delivery system for severe, refractory spasticity, or chronic intractable dystonia is considered medically necessary when there is failure, contraindication, or intolerance to at least a six-week trial of oral antispasmodic drugs and physical therapy.

A trial with a percutaneous intrathecal or epidural drug delivery system for cancer-related pain is considered medically necessary when there is failure, intolerance, or contraindication to noninvasive methods of pain control, including systemic opioids.

A permanent implantable intrathecal or epidural drug delivery system for the above listed pain conditions is considered medically necessary if the individual has met the above criteria for a preliminary trial and has experienced at least a 50 percent reduction in pain during an appropriate trial.

An intrathecal or epidural drug delivery system is experimental, investigational, or unproven for 1) cancerrelated pain, spastic, dystonic, or other pain conditions that do not meet the above criteria, 2) administration of insulin for diabetes, 3) administration of antibiotics for osteomyelitis, and 4) administration of heparin for thromboembolic disease.

Where can I find additional tools and resources related to my musculoskeletal requests for prior authorization?

You can access important Cigna **MSK program resources** on the implementation website at http://www.medsolutions.com/implementation/cigna/msk/index.html.

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To access eviCore healthcare's clinical guidelines online, visit www.evicore.com.

- Click on "Resources" from the main menu, and select "Providers." Once you have clicked "Providers," you will see the Clinical Guidelines section.
- The "Clinical Guidelines" section provides a dropdown box that allows you to Select Solution (Musculoskeletal). Click on the solution you need, and all clinical guidelines for that solution will populate.

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