



Network Notification

Date: May 26, 2011

Number: OH-P-2011-28
MI-P-2011-14

To: Ohio and Michigan Providers

From: CareSource

Subject: Epidural Steroid and Selective Transforaminal Epidural Injections

CPT Codes Involved: 62310-62311 and 64479-64484

Effective Date: July 1, 2011

Below outlines CareSource's reimbursement policy related to Epidural Steroid and Selective Transforaminal Epidural Injections.

Policy:

CareSource will consider Epidural Steroid and Selective Transforaminal Epidural Injections (also known as selective nerve root blocks, SNRB) as clinically appropriate and medically necessary for diagnosis of acute and sub-acute sciatica, or radicular pain of the low back or other levels that is unresponsive to a reasonable trial of a well-managed course of conservative therapy.

Details:

More than three epidural injections by the same or any physician within a 12 month period will require a prior authorization.

Anesthesia:

Monitored anesthesia (CPT codes: 01991, 01992, 01935, 01936) will be denied for medical necessity when provided in conjunction with all of the Epidural Injections defined in this policy. Denials for anesthesia services will be reviewed only by appeal with supportive medical necessity documentation.

For additional information, please review CareSource's [Pain Management Interventional Procedures Policy](#).