

**Subject: Pain Management Injections**

**Programs Covered:** OH Medicaid, OH MyCare

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### ***Policy***

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Effective July 1, 2012, CareSource will reimburse charges for trigger point injections that are provided to CareSource members by physicians credentialed with CareSource as Pain Management specialists, for the management of pain unresponsive to conservative treatment. These trigger point injections must be part of a comprehensive pain management program for the member that incorporates initially a trial of conservative treatment utilizing appropriate medications, physical therapy modalities and behavioral support as needed.

This policy addresses and covers the following procedures only:

1. Trigger Point Injections;
2. Associated anesthesia.

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### ***Definitions***

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**“Current Procedural Terminology” (“CPT”)** codes are numbers assigned to every task, medical procedure, and service a medical practitioner may provide to a patient. CPT codes are developed, maintained and updated annually, and copyrighted by the American Medical Association. *(From ama-assn.org)*

**“Medically necessary”** services are those health services that are necessary for the diagnosis or treatment of disease, illness, or injury and meet accepted standards of medical practice. *(from OAC 5160-10-02)*

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### ***Provider Reimbursement Guidelines***

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Medical necessity for submitted claims must be individualized and documented in the medical record and included in the treatment plan of care. All documentation must be maintained in the member's medical record and available to CareSource upon request.

#### **1. Trigger Point Injections**

CareSource will reimburse for no more than 8 trigger point injections in any 12 month period for any of its members, regardless of location of service, rendering provider, or interval between injections. The use of trigger point injections should only be considered in members with a new incidence of pain and repeated only with documented positive results. Because of insufficient evidence to document the effectiveness of trigger point injections for chronic pain management, greater than 8 trigger point injections within a 12 month period will be considered not medically necessary, and subsequent claims will be denied.

## **2. Anesthesia for Trigger Point Injections:**

Monitored anesthesia will be denied for trigger point injections as not medically necessary.

- Conscious sedation, if required for co-morbidities or patient/physician preference, may be provided without prior authorization but services will be considered part of the procedure and are not eligible for additional reimbursement.
- If conscious sedation services are provided they must be delivered by CareSource contracted and credentialed providers, including anesthesiologists and CRNAs.

### **Limitations:**

Injections administered by participating physicians will be reimbursed for the bundled CPT code which includes both the injection administration and the pain medication.

CareSource will not reimburse any claim which shows the separate (unbundled) cost for (a) the administration of the injection and (b) the medication. Additionally, CareSource will not reimburse a non-participating provider or pain management clinic or anesthesia group (or other such non-participating provider) for either the administration of these injections or the pain medications injected, without prior authorization from CareSource.

Compliance with the provisions in this policy may be monitored and addressed through post payment data analysis and subsequent medical review audits.

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### ***Related Policies & References***

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Ohio Administrative Code 5160-4-13, "Relocated provisions concerning injections and provider-administered pharmaceuticals."

CareSource Medical Policy Statement, "Pain Management Interventional Procedures Policy."

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### ***State Exceptions***

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NONE

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### ***Document Revision History***

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