



January 22, 2018

Laxmaiah Manchikanti, MD
Chairman of the Board and
Chief Executive Officer, ASIPP, SIPMS
81 Lakeview Drive
Paducah, KY 42001

Dear Dr. Manchikanti,

Thank you for your letter on behalf of the ASIPP members regarding AIM's MSK interventional pain guidelines. We appreciate you taking the time to acknowledge the evidentiary basis and impact of AIM guidelines and for sharing your concerns about certain language within the interventional pain guideline document.

In response to your belief that our process did not involve appropriate stakeholders I would like to assure you that AIM's independent MSK specialty and multidisciplinary panels do include representation from interventional pain physicians as well as physiatrists, neurologists, orthopedic surgeons and neurosurgeons.

Regarding your concern that "available evidence may not have been utilized appropriately." AIM typically requires a consistent body of evidence that provides moderate to high confidence that the intervention in question safely improves patient centered outcomes relative to the current standard of care and/or is consistent with recommendations from high quality evidence based clinical guidelines. This evidence is then evaluated for clinical practice readiness based on an assessment of the risks and benefits of the procedure and alignment with current clinical practice.

AIM interventions currently cover cervical and lumbar epidural injections for radicular pain and mild spinal stenosis. Medial branch blocks are covered but only for diagnostic purposes. We do not, however, believe that thoracic epidural injections or percutaneous epidural adhesiolysis have met AIM's requirement for a consistent body of moderate to high quality evidence for effectiveness relative to current standard of care.

AIM's interventional pain guidelines are reviewed at least annually and new evidence is reviewed and incorporated as appropriate on that review. Of course anytime new ground breaking evidence is released that would substantially alter one of our guidelines an earlier review is triggered. We will be sure to share your letter and concerns with our interventional pain experts and again appreciate your input.

Sincerely,

A handwritten signature in cursive script, appearing to read "Robert J. Mandel".

Robert J Mandel, MD, MBA