• NO RELEVANT CONFLICTS
4 CONCERNS FROM THE LCD

- Deletion of Percutaneous Adhesiolysis
  - Suggestion – Add to the LCD
- 12 month limit on ESI
  - Suggestion – Eliminate this portion of the LCD
- Duration between procedures
  - Suggestion – Still limit 4 per year but consider more freedom to do them
- Cap on total steroid dose
  - Suggestion – change to lowest effective dose
PERCUTANEOUS ADHESIOLYSIS

- Safe and Effective Technique
- Was part of the discussion and SME section
- Not included in the LCD
- Represents a cost effective approach to treating patients
12 MONTH LIMIT ON ESI

• Concerns for unneeded documentation burden
• The LCD already has rigid criteria and limitations for total number of procedures in place- still have to follow those after 12 months
• The LCD already has guardrails in place to prevent abuse beyond 12 years
• Elderly or chronic condition patients
• Suggest to change language from “Radiculopathy” to “Radicular Pain”
DURATION BETWEEN PROCEDURES

• Time span seems arbitrary and not evidenced based
• Why would it matter if you limit to a total of 4 per year?
• Acute Radiculopathy – disk herniation or acute injury may benefit from multiple treatments closer together
• Multiple ways to help – suggest 2 – 4 weeks for the first two or suggest that repeat injections can be completed with appropriate documentations of success and rationale for repeat
CAP ON TOTAL DOSE

• Strange because there is a limit on 4 injections per year – so even at higher doses it would not be clinically significant

• Not evidenced based

• All for lowest effective dose and physician discretion

• Medrol Dosepacks are unregulated and used commonly in radiculopathy and represent a much higher systemic dose
4 CONCERNS FROM THE LCD - SUMMARY

• Deletion of Percutaneous Adhesiolysis
  • Suggestion – Add to the LCD

• 12 month limit on ESI
  • Suggestion – Eliminate this portion of the LCD

• Duration between procedures
  • Suggestion – Still limit 4 per year but consider more freedom to do them

• Cap on total steroid dose
  • Suggestion – change to lowest effective dose
• THANKS!