



November 7, 2013

BlueCross BlueShield of Tennessee
Medical Policy
1 Cameron Hill Circle
Chattanooga, TN 37402
Submitted Electronically via: medical_policy@bcbst.com

RE: DMP1013-02 [Cervical Epidural Steroid Injections for the Treatment of Pain](#)

To Whom It May Concern:

The International Spine Intervention Society (ISIS), a multi-specialty association of 3,000 physicians dedicated to the development and promotion of the highest standards for the practice of interventional procedures in the diagnosis and treatment of spine pain, would like to take this opportunity to comment on your policy for cervical epidural steroid injections for the treatment of pain.

Our organization has a strong record of working to eliminate fraudulent, unproven, and inappropriate procedures. At the same time, we are committed to assuring that appropriate, effective, and responsible treatments are preserved so that patients do not have to suffer, or undergo more invasive surgical procedures, unnecessarily. ISIS membership includes many of the clinicians and academicians whose published literature provides the seminal references upon which the practice of evidence-informed interventional spine care is based.

We note that the current policy draft states that cervical epidural steroid injections for the treatment of pain are considered investigational. We disagree with this assessment and are enclosing information to assist in a balanced and diligent review, including a statement on therapeutic cervical interlaminar epidural injections that was endorsed by 11 national and international specialty societies¹ and submitted to the Washington State Health Technology Assessment (HTA) Program as part of a technology review. In addition, we would like to point out that upon extensive and rigorous review, which took more than a year to complete, the Washington State HTA committee voted to cover therapeutic lumbar and cervical/thoracic epidural injections. This committee is well known to be very scientific and critical in their coverage policies.

¹ American Association of Neurological Surgeons (AANS), American Academy of Pain Medicine (AAPM), American Academy of Physical Medicine and Rehabilitation (AAPMR), American College of Radiology (ACR), American Society of Anesthesiologists (ASA), American Society of Neuroradiology (ASNR), American Society of Spine Radiology (ASSR), Congress of Neurological Surgeons (CNS), International Spine Intervention Society (ISIS), North American Spine Society (NASS), Society of Interventional Radiology (SIR)

The HTA committee concluded that: "The current evidence on spinal injections demonstrates that there is sufficient evidence to cover with conditions the use of therapeutic epidural injections in the lumbar or cervical-thoracic spine for chronic pain." They further stated "Based on the evidence about technologies', safety, efficacy, and cost-effectiveness, therapeutic epidural injections in the lumbar or cervical-thoracic spine is a covered benefit when all of the following conditions are met:

- For treatment of radicular pain
- With fluoroscopic guidance or CT guidance
- After failure of conservative therapy
- No more than two without clinically meaningful improvement in pain and function
- Maximum of 3 in 6 months."

We strongly encourage BCBS of TN to consider the information above to reevaluate the proposed policy.

Additionally, we include excerpts from the ISIS 2nd Edition Guidelines² that provide effectiveness and efficacy summaries for transforaminal as well as interlaminar approaches for epidural injections.

We hope that this information, as well as any dialogue and collaboration between BCBS of TN and ISIS, will lead to the formation of reasonable coverage policy that would eliminate inappropriate utilization while preserving reasonable access in appropriate cases. We offer our ongoing input and expertise in this matter. If we may answer any questions or provide any assistance, please feel free to contact Margaret Klys at the International Spine Intervention Society (ISIS) at advocacy@spinalinjection.org or 708-505-9416.

Sincerely,



Jeffrey Summers, MD
President
International Spine Intervention Society

Attachments:

1. *Therapeutic Epidural Injections – sections of a multi specialty society comment letter submitted to the Washington State Health Technology Assessment (HTA) Clinical Committee*
2. *Bogduk N (ed). Practice Guidelines for Spinal Diagnostic and Treatment Procedures, 2nd edn. International Spine Intervention Society, San Francisco, 2013. Evidence summaries from Cervical Interlaminar Epidural Access chapter and Cervical Transforaminal Access chapter.*