Clinical review is required for adult members (age ≥18). The medical necessity criteria are outlined below.

CPT codes: *62350, *62360, *62361, *62362

**Complex regional pain syndrome (CRPS)**

ALL the following must be met:

1. History of pain or burning in affected area that is disproportionate to the inciting event (for example, pain with non-painful stimulus, abnormal sensitivity to pain or continuous pain).
2. TWO OR MORE of the following findings of affected area:
   a. Swelling or tenderness
   b. Cyanotic or red or pale digit or extremity
   c. Increased sweating
   d. Alteration of temperature
   e. Trophic skin changes
   f. Flexion contractures
3. Continued symptoms after treatment with ALL of the following:
   a. Sympathetic block with an anesthetic agent
   b. Physical therapy, occupational therapy or physician directed home exercise for at least 6 months
   c. Antidepressant or antiepileptic drugs for at least 4 weeks
4. Psychological evaluation reveals all significant psychiatric, psychosocial and substance abuse issues have been adequately addressed.
5. ONE of the following:
   a. Trial of epidural or intrathecal drug infusion
   b. Permanent implantation of epidural or intrathecal drug infusion catheter AND BOTH of the following:
      i. Trial of epidural or intrathecal drug infusion completed
      ii. The patient’s medical record documents AT LEAST 50 percent reduction in pain after infusion trial

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Failed back surgery syndrome

ALL the following must be met:

1. History of lumbar surgery AND ONE of the following:
   a. At least 2 prior surgeries at same level
   b. At least 1 prior surgery at >1 level
   c. Spinal fusion surgery (any level)

2. ALL of the following:
   a. NO spinal cord compression identified by BOTH physical examination AND imaging that would obstruct placement
   b. Refractory pain interferes with ADLs

3. Continued pain after treatment for at least 6 months with ALL the following:
   a. Surgery (unless the patient is not a candidate or would not benefit from additional back surgery)
   b. Medication management (for example, oral, injectable, topical)
   c. Physical therapy, occupational therapy or physician-directed home exercise
   d. Passive modalities (for example, heat, cold)

4. Psychological evaluation reveals all significant psychiatric, psychosocial and substance abuse issues have been adequately addressed.

5. ONE of the following:
   a. Trial of epidural or intrathecal drug infusion
   b. Permanent implantation of epidural or intrathecal drug infusion catheter AND BOTH of the following:
      i. Trial of epidural or intrathecal drug infusion completed
      ii. The patient’s medical record documents AT LEAST 50 percent reduction in pain after infusion trial
Severe cancer pain
ALL the following must be met:
1. No epidural metastatic lesion(s) or tumor encroachment of the thecal sac by imaging
2. No local infection at the catheter insertion site
3. No increased intracranial pressure
4. Life expectancy of at least 3 months
5. Continued pain after maximal treatment with opioids (unless contraindicated or not tolerated)
6. Psychological evaluation reveals all significant psychiatric, psychosocial and substance abuse issues have been adequately addressed
7. ONE of the following:
   a. Trial of epidural or intrathecal drug infusion
   b. Permanent implantation of epidural or intrathecal drug infusion catheter and BOTH of the following:
      i. Trial of epidural or intrathecal drug infusion completed
      ii. The patient’s medical record documents AT LEAST 50 percent reduction in pain after infusion trial

References
Change Healthcare’s InterQual® 2018 Procedures Criteria Epidural or Intrathecal Catheter Placement
Change Healthcare’s InterQual® 2018 Procedures Criteria Epidural or Intrathecal Catheter Placement
Trial