Update to AIM Musculoskeletal Program Clinical Appropriateness Guidelines

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Effective for dates of service on and after May 18, 2019, the following updates will apply to the AIM Specialty Health Musculoskeletal Program Clinical Appropriateness Guidelines.

Spine Surgery - Enhancements as indicated by section below:

- General requirements
    - Reporting of symptom severity: expanded to include IADLs as functional impairment
    - Tobacco cessation: removed nicotine-free documentation requirement
- Cervical decompression with or without fusion
    - Added exclusion of cervical/thoracic laminectomy if criteria not met
- Lumbar discectomy, foraminotomy, and laminotomy
    - Added criteria to define radicular pain for lumbar herniated intervertebral disc
- Lumbar fusion and treatment of spinal deformity (including scoliosis and kyphosis)
    - Added indication and criteria for flat back deformity
    - Added criteria for isthmic spondylolisthesis
    - Added indication and criteria for Scheuermann's kyphosis
- Lumbar laminectomy

- Exclusion of lumbar laminectomy if criteria not met

- Noninvasive electrical bone growth stimulation
    - Added risk factor criteria for cervical non-invasive bone growth stimulation

Interventional Pain Guidelines - Enhancements as indicated by section below:

- General requirements
    - Reporting of symptom severity: expanded to include IADLs as functional impairment

- Therapeutic epidural steroid injection
    - Updated time period of initial advanced imaging
    - Definition and frequency of repeat therapeutic epidural steroid injection
    - Updated maximum number of annual injections
    - Added criteria for subsequent injection after suboptimal initial response

- Paravertebral facet injection/nerve block/neurolysis
    - Updated injection frequency limitations

- Diagnostic intraarticular sacroiliac joint injections
    - Updated pain reduction from initial injection

- Spinal cord stimulators
    - Added criteria for revision/removal of spinal cord stimulator

- Separated criteria of trial stimulation and permanent stimulator implantation
- Added exclusion of dorsal root ganglion stimulation

As a reminder, ordering and servicing providers may submit prior authorization requests to AIM in one of several ways:

- Access AIM's ***Provider****Portall*$_{SM}$ directly at providerportal.com. Online access is available 24/7 to process orders in real-time, and is the fastest and most convenient way to request authorization.
- Access AIM via the Availity Web Portal at availity.com
- Call the AIM Contact Center toll-free number: 866-714-1107, Monday–Friday, 8:00 a.m.–5:00 p.m.

Please note, this program does not apply to FEP or National Accounts.

For questions related to guidelines, please contact AIM via email at aim.guidelines@aimspecialtyhealth.com. Additionally, you may access and download a copy of the current guidelines here.

URL: https://providernews.anthem.com/maine/article/update-to-aim-musculoskeletal-program-clinical-appropriateness-guidelines

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