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
  - Added 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****Portal*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: Central: 800-554-0580, Monday – Friday, 8:30 a.m. – 7:00 p.m. ET.

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/wisconsin/article/update-to-aim-musculoskeletal-program-clinical-appropriateness-guidelines-3

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