

Hillsborough County Health Care Plan Pain Management Coverage Guidelines

PAIN MANAGEMENT, ACUTE

Acute pain management is defined as 60 days or less in duration for non-surgical events and for-post surgical events, 90 days or less in duration.

- Coverage is limited to acute injury, dental, and pre- and post-surgical events.

PAIN MANAGEMENT, CHRONIC

Chronic pain management is defined as greater than 60 days in duration, with the exception of post-surgical events, which may be no greater than 90 days in duration.

- Chronic pain management is not covered, except in cases with hematologic/oncologic diagnosis/treatment.
- No coverage is provided for back surgeries for pain management unless acute injury or significant neurological deficit.
- No coverage for diagnostic Steroid Injections (SI) and/or Facet Injections, or for injections to evaluate or assess source of pain. Facet injections are occasionally referred to as para-vertebral injections, para-spinal injections and/or median nerve blocks.
- No coverage is provided for therapeutic facet or SI joint injections.
- Coverage is provided for trigger point and Synvisc injections for clients who have failed a conservative pain management treatment plan. Review by KePRO is required.
- Coverage is provided for no greater than two sets of trigger point injections per 12 month period for myofascial pain syndrome.
- Coverage is provided for a maximum of 3 Epidural Steroid Injections in a 12 month period for disc herniation, disc protrusion and Post Herpetic Neuralgia only.
- Multilevel transforaminal epidural steroid injection for disc herniation, disc protrusion and Post Herpetic Neuralgia only will be treated the same as one level central epidural steroid injection and approved as 1 procedure instead of several different procedures.
- No coverage for Anesthesia administration for monitored anesthesia care (MAC) for Epidural Steroid Injections or other injection procedures.

PRESCRIPTIONS

- Prescription coverage for controlled substances, including Tramadol, is limited to acute pain management events only, except in cases with hematologic/ oncologic diagnosis/treatment.
- Prescriptions cannot exceed a total of 90 days for post-surgical events and a total of 60 days for all other acute pain management events.
- Long-term Controlled substance and Tramadol prescriptions are not covered (e.g., greater than 60 days for acute pain management events, with the exception of post- surgical events, which can be no greater than 90 days.)
- No dispensing of any narcotic medications including Tramadol from in-office or affiliated pharmacy at Pain Management Clinics for HCHCP patients.
- Prescription limitations
 - All controlled substances will have. 60 day lifetime limit per client; post surgical beyond 60 days requires PA
 - Secondary incidences will require PA
 - Post surgical beyond 90 days requires HCHCP approval

Notes:

- (1) New HCHCP enrollees will not be eligible for Chronic Pain Management Services effective June 21, 2010.
- (2) Existing Members will be weaned off of Medications using the KePRO authorization process currently in place.
- (3) Members with a break in coverage greater than 45 days will be considered “new” members for the purpose of No. 1 above.
- (4) Non-pain management providers will experience no changes to current practices/limitations already in place.
- (5) Back Surgery limitations will be reflected separately from the pain management guidelines in the final document but are reflected here for purposes of discussion at the Medical Subcommittee.