



NHS MEDICAL POLICY

JOINT INJECTIONS PROCEDURE 2014-002

Intra-articular joint injections may be indicated when ALL the following are present:

1	The intended injection is NOT epidural spinal, facet joint or medial branch nerve block. <i>(For other spine injections, see other corresponding guidelines and policies.)</i>
2	Member has had joint pain for at least 3 months.
3	Pain is likely to be due to a chronic degenerative process (e.g., osteoarthritis) in the affected joint based on history, location, physical examination, and imaging studies.
4	Other causes of pain have been ruled out, treated or are less likely based on the above evaluation.
5	The injections are not used in isolation but are provided as part of a comprehensive pain management program, which may include physical therapy, patient education, psychosocial support and oral medication where appropriate.
6	Conservative measures have not relieved the pain.
7	No coagulopathy or current use of anticoagulants or antiplatelet therapy is documented by the provider. The provider notes may describe a plan to address this issue or why it is not a contraindication.
8	If the affected joint is sacroiliac, ALL the following must also be documented: <ul style="list-style-type: none"> • The member has had no more than one prior sacroiliac joint injection on the same side within the past two months. • The member has had no more than 6 prior sacroiliac joint injections on the same side within the past year. • Any prior sacroiliac joint injection in the same side was more than 7 days ago.

SOURCES

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16. Milliman Care Guidelines, current version: Musculoskeletal Surgery or Procedure GRG: SG-MS (ISC GRG).
17. UpToDate.com was accessed Apr 15, 2016: Intraarticular and soft tissue injections; Joint aspiration or injection in adults: Technique and indications & Complications; Joint aspiration or injection in children: Indications, technique, and complications.

CODE REFERENCE (This may not be a comprehensive list of codes to apply to this policy.)

CPT 27096, 27096
HCPCS G0260

POLICY HISTORY/REVISION INFORMATION

Date	Action/Description
02/26/2015	Reviewed by UM Committee (previously only sacroiliac injections)
03/20/2015	Update approved in UM committee (previously only sacroiliac injections)
12/16/2015	Annual Medical Policy review & approval (previously only sacroiliac injections)
09/14/2016	Revision to include all non-spine, intra-articular joint injections not covered in Milliman Care Guidelines This policy was previously called sacroiliac injections. It was updated to include all non-spine joint injections and still includes sacroiliac injections. The content about sacroiliac injections was not changed. All these injections are not addressed specifically enough in MCG. The policy number is the same. The title and content were updated.
09/12/2017	Annual review and approval by UM Committee
09/12/2018	Line 1 added: The intended injection is NOT epidural spinal, facet joint or medial branch nerve block.
09/12/2019	Annual review and approval by UM Committee
09/12/2020	Annual review and approval by UM Committee
09/10/2021	Annual review and approval by UM Committee
09/19/2022	Annual review and approval by UM Committee
08/23/2023	Annual review and approval by UM/QM Committee