June 15, 2020

Subject: AIM Specialty Health® Prior Authorization (PA) Changes

Dear Provider,

Blue Cross of Idaho is implementing changes to the PA requirements and clinical appropriateness guidelines for groups participating in AIM Specialty Health® (AIM) musculoskeletal/joint/pain (MSK) and imaging programs. PA changes may not apply to all contract types, such as the Federal Employee Program (FEP) and certain self-insured groups. Remember to check member eligibility and PA requirements before performing services. The following changes are effective August 16, 2020:

**Interventional Pain Management:**

**General Requirements – Conservative Management**
- Addition of physical therapy or home therapy requirement and one complementary modality based on preponderance of benefit over harm to conservative care
- Align with approach to conservative management defined in spine and joint surgery guidelines

**Epidural Injection Procedures and Diagnostic Selective Nerve Root Blocks**
- Addition of statement about adherence to ESI procedural best practices established by FDA Safe Use Initiative. Recommendations are intended for provider education and will not be used for adjudication.
- Clarification of intent around requirement for advanced imaging for repeat injections

**Paravertebral Facet Injection/Nerve Block/Neurolysis**
- Remove indication of four unilateral medial branch blocks per session based on panel consensus
- Procedural clarification restricting use of corticosteroids for diagnostic MBB based on panel consensus
- Limit use of intra-articular steroid injection to mechanical disruption of a facet synovial cyst
- Remove indication for intra-articular steroid injections based on new evidence for lack of efficacy
- Increase duration of initial RFN efficacy needed to avoid an MBB to six months based on panel consensus
- Clarification that MBB or RFN is not medically necessary after spinal fusion

**Spinal Cord and Nerve Root Stimulators**
- Clarify inclusion of different stimulation methods for spinal cord stimulation
- Add new indication for dorsal root ganglion stimulation
- Clarify exclusions for spinal cord and dorsal root ganglion stimulation

**Advanced Imaging – Chest Tumor or Neoplasm**
- Allowed follow up of nodules less than 6 mm in size seen on incomplete thoracic CT, in alignment with follow-up recommendations for nodules of the same size seen on complete thoracic CT
• Added new criteria for which follow up is indicated for mediastinal and hilar lymphadenopathy
• Separated mediastinal/hilar mass from lymphadenopathy, which now has its own entry

**Parenchymal Lung Disease (not otherwise specified)**
• Removed as it is covered elsewhere in the document (parenchymal disease in occupational lung diseases and pleural disease in other thoracic mass lesions)

**Interstitial Lung Disease (ILD), Non-Occupational Including Idiopathic Pulmonary Fibrosis (IPF)**
• Defined criteria warranting advanced imaging for both diagnosis and management

**Occupational Lung Disease (adult only)**
• Moved parenchymal component of asbestosis into this indication
• Added Berylliosis

**Chest Wall and Diaphragmatic Conditions**
• Removed screening indication for implant rupture due to lack of evidence indicating that outcomes are improved
• Limited evaluation of clinically suspected rupture to patients with silicone implants

**Advanced Imaging – Oncology**

**MRI breast**
• New indication for BIA-ALCL
• New indication for pathologic nipple discharge
• Further define the population of patients most likely to benefit from preoperative MRI

**Breast Cancer Screening**
• Added new high-risk, genetic mutations appropriate for annual breast MRI screening

**Lung Cancer Screening**
• Added asbestos-related lung disease as a risk factor

**Sleep Disorder Management**

**Bi-Level Positive Airway Pressure Devices**
• Change in BPAP FiO₂ from 45 to 52 mmHg based on strong evidence and aligns with Medicare requirements for use of BPAP

**Multiple Sleep Latency Testing and/or Maintenance of Wakefulness Testing**
• Style change for clarity

For questions related to clinical guidelines, email AIM at aim.guidelines@aimspecialtyhealth.com. The current guidelines are available for review or at aimspecialtyhealth.com. Providers can access additional resources and training on the provider portal at providers.bcidaho.com by selecting Advanced Imaging or musculoskeletal/joint/pain.

Sincerely,

Blue Cross of Idaho

Healthcare Operations