

March 7, 2023

National Government Services  
Medical Policy Unit  
P.O. Box 7108  
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[PartBLCDComments@elevancehealth.com](mailto:PartBLCDComments@elevancehealth.com)

**Re: Final LCD on Sacroiliac Joint Injections and Procedures**

**To Whom It May Concern:**

The undersigned medical specialty societies, comprising physicians who utilize and/or perform interventional spine procedures to accurately diagnose and treat patients suffering from spine pathologies, would like to take this opportunity to express our strong support for coverage of sacroiliac interventions for pain management, and provide a detailed explanation of their importance to patients' quality of life.

Our societies have a strong record of working to eliminate fraudulent, unproven, and inappropriate procedures. At the same time, we are equally committed to assuring that appropriate, effective, and responsible treatments are preserved.

**Significant relief of pain, improved quality of life, restoration of function, and decreased utilization of other healthcare resources** are outcomes that should be readily available to patients covered by Medicare. When sacroiliac interventions are performed in a disciplined and responsible manner, they achieve outcomes that are clinically, socially, and economically worthwhile.

We are extremely disheartened to learn that the Medicare Administrative Contractors have eliminated access to sacroiliac joint radiofrequency ablation for Medicare beneficiaries -- a procedure proven to be safe and effective in providing pain relief and functional improvement in appropriately selected patients. Patients being considered for this procedure are those who have already failed conservative treatment. Prohibiting access to sacral lateral branch radiofrequency neurotomy will leave them with only surgery or opioids as their alternative covered treatment options.

The undersigned societies believe the current literature supports these procedures, but also look forward to providing additional comments and robust literature to support sacroiliac joint interventional access in the future. We welcome the opportunity to again work with the Medicare Administrative Contractors to revise the coverage criteria included in the LCDs to ensure appropriate access to sacroiliac interventions for Medicare patients. If you have any questions or wish to discuss further, please contact Sarah Cartagena, Director of Health Policy at the Spine Intervention Society, at [scartagena@spineintervention.org](mailto:scartagena@spineintervention.org).

Sincerely,  
American Academy of Pain Medicine  
American Academy of Physical Medicine and Rehabilitation  
American College of Radiology  
American Society of Anesthesiologists  
American Society of Neuroradiology

American Society of Regional Anesthesia and Pain Medicine  
American Society of Spine Radiology  
Connecticut Pain Society  
North American Neuromodulation Society  
North American Spine Society  
Society of Interventional Radiology  
Spine Intervention Society