Effective January 2012, this approach requires that patients receive an evaluation from a HealthPartners Designated Medical Spine Center (MSC) prior to the first office visit with a Spine Surgeon for specified lumbar conditions unless there is an emergent indication.

Designated Medical Spine Centers:

- Focus on the non-surgical, comprehensive management of spine problems using a biopsychosocial active re-conditioning model.
- A medical spine specialist evaluation helps support prospective surgical patients and their physicians so they may understand the full range of options when choosing the treatment path that is right for them.

HIGHLIGHTS:

**This DOES apply to patients:**
- Considered a surgical candidate
- 18 yrs or older
- That have Commercial, Medicaid, HPI secondary coverage
- With Lumbar back pain

**This DOES NOT apply to patients:**
- With Medicare, MHSO, Workers comp coverage
- With emergent or exempt conditions as outlined in the Spine Surgery Office Visit policy
- In the ER or inpatient settings
- Outside of the designated geographic area

RESOURCE LINKS

- Spine Surgery Low Back Pain Office Visit policy
- List of Designated Medical Spine Centers
- MSC Geographic Region
- MSC Elements of Evaluation
- Explaining MSC Visit to your Patient – Handout
- Back Pain Website for Provider
- Back Pain Website for Patients
For Primary Care Physicians:

If a patient has an emergent low back pain condition:
- Send the patient directly to the surgeon
- A Medical Spine evaluation is not needed
- Communicate to the surgeon’s office reason you are sending the patient without a Medical Spine Specialist evaluation

NON-Emergent Low Back Pain Condition:
- Send your patient to a Medical Spine specialist for an evaluation
- Use the MSC Patient hand-out to help explain what MSC specialist will be doing
- The Medical Spine Center will send you a visit summary

HIGHLIGHTS:
- For emergent conditions always indicate specific condition to surgeon
- No referring authorization is needed
- Review the MSC evaluation, which will also be given to the patient
- Provide a copy of the MSC evaluation to the surgeon when scheduling spine surgeon visit

RESOURCE LINKS
- FAQ for Primary Care
- Explaining MSC Visit to your Patient – Handout
- Back Pain Website for Provider
- Back Pain Website for Patients

For Medical Spine Specialists:

Appointment Requests

For best patient experience, your appointment staff at all your clinic sites should be aware of the MSC evaluation process, location of your medical spine specialists, and the possible way a patient may request a visit. When a patient calls they may:
- Ask to see a Medical Spine Center or a Medical Spine Specialist, or
- Or the patient may simply say they need to see a surgeon and were told to make an appointment with you first

Evaluation Visit

- Patients on their way to a Spine Surgery office visit will be seen in a timely matter
- Medical Spine Specialist will incorporate the elements of evaluation into their documented visit
- After the visit, the patient, referring clinician and upon request, the surgeon will be provided with a visit summary
- The health plan will be reaching out or your clinic to get a list of patients with MSC visits for a patient experience survey

HIGHLIGHTS:
- Frontline staff, including schedulers, need to know and understand what a Medical Spine Center is
- Health Plan will outreach to you for a list of patients to conduct an early patient experience survey

RESOURCE LINKS
- MSC Elements of Evaluation
- Back Pain Website for Provider
For Spine Surgeons

Scheduling First Office Visit

For best patient experience, your appointment staff at all your clinic sites should be aware of the MSC evaluation process and when a patient must have completed a MSC evaluation prior to scheduling the visit.

• When the condition is emergent or exempt as outlined in the Spine Surgery Office Visit policy they do not need a MSC evaluation. Please see the update section below for recent coding changes

• When the condition is not emergent, ask your patient if they have seen one of the Designated Medical Spine Specialists within the past 6 months:
  o If not, direct them to call the Member Services number on the back of their insurance card for assistance
  o If they have, call the Designated MSC to request a copy of the visit summary notes and submit the Office visit prior authorization form

• See the FAQ for Medical Spine Center and Spine Surgeons for further details on when a Medical Spine evaluation is needed.

After the First Office Visit

• If, after the visit, you and the patient decide surgery is the next step, please remember to submit all necessary prior authorization forms with required documentation.

RESOURCE LINKS

• FAQ for Medical Spine Centers and Spine

• Spine Surgery – Low Back Pain Office Visit policy
• Spine Surgery – Low Back Pain Office Visit PA form

• Spinal Fusion – Lumbar policy
• Spinal fusion - Lumbar PA form

• Back Pain Website for Provider
Additional Information:

Epic Users
For those of you using the Epic system, we have several providers that have been successful in implementing a change that alerts the primary care physician that the patient needs to see a Medical Spine Center before consulting with a Spine Surgeon. They are willing to share their process with you. If interested in learning more about this, contact Melanie Teske at 952-883-7180.

Member Resources
A referring physician treating a patient for low back pain will likely be the first person to discuss and recommend a MSC visit. Members can get an overview of the Medical Spine Center approach and a list of Designated Medical Spine Centers in their area by calling HealthPartners Member Services or visiting www.healthpartners.com and clicking the Health & Wellness tab.

Other Resources Available
This Fast Facts edition, as well as previous Fast Facts, FAQ documents, policies, and patient resources, can be found by visiting the HealthPartners Back Pain Page or www.HealthPartners.com/backpain
**MEDICAL POLICY UPDATES**

**Spine Surgery – Low Back Pain Office Visits Prior authorization Policy Coding Changes**

*ICD-9 and E&M codes have changed* since the 11/1/2011 Fast Facts Mailing effective 4/1/2012. Below is a list of the code changes. For complete details see the revised Spine Surgery – Low Back Pain Office Visits Policy on our website.

**CODES:REMOVED from the list that requires prior authorization**

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<thead>
<tr>
<th>ICD-9 Code</th>
<th>Description</th>
<th>E &amp; M codes</th>
<th>Description</th>
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<tbody>
<tr>
<td>737.39</td>
<td>Other kyphoscoliosis and scoliosis</td>
<td>99241</td>
<td>Office consultation for a new or established patient,</td>
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<tr>
<td>737.40</td>
<td>Unspecified curvature of spine associated ..</td>
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<td>Kyphosis associated with other condition</td>
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<td>99244</td>
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<tr>
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<tr>
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<td>Congenital spondylolisthesis</td>
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<tr>
<td>756.19</td>
<td>Other congenital anomaly of spine</td>
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<td></td>
</tr>
<tr>
<td>839.20</td>
<td>Closed dislocation, lumbar vertebra</td>
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<td></td>
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</table>

**CODES:ADDED to EXEMPT list that do NOT Require Prior Authorization**

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<tbody>
<tr>
<td>737.39</td>
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<td>Curvature of spine associated with other conditions</td>
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<td>Other congenital anomaly of spine</td>
</tr>
<tr>
<td>839.20</td>
<td>Closed dislocation, lumbar vertebra</td>
</tr>
</tbody>
</table>

**CODES:ADDED to list REQUIRES Prior Authorization**

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<th>Description</th>
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<tbody>
<tr>
<td>738.5</td>
<td>Other acquired deformity of back or spine</td>
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<td>Nonallopathic lesion of lumbar region, not elsewhere classified</td>
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<tr>
<td>739.4</td>
<td>Nonallopathic lesion of sacral region, not elsewhere classified</td>
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<tr>
<td>739.5</td>
<td>Nonallopathic lesion of pelvic region, not elsewhere classified</td>
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<tr>
<td>847.2</td>
<td>Lumbar sprain and strain</td>
</tr>
<tr>
<td>953.2</td>
<td>Injury to lumbar nerve root</td>
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</tbody>
</table>

**RESOURCE LINKS**

- Spine Surgery – Lumbar Low Back pain Office visit policy