



Interventional Pain Management Checklist

To expedite the process, please have the following information ready before logging on to www.RadMD.com or calling the Magellan Healthcare¹ Utilization Management staff. Medical necessity determinations are based on Magellan Healthcare Clinical Guidelines. Magellan Healthcare Clinical Guidelines are available on www.RadMD.com.

Clinical information must be documented in office visit notes or other medical record documentation, such as x-ray results, diagnostic imaging or testing reports, or other physician referral documentation. Handwritten notes on cover sheets, telephone calls, or other fax pages that are not reflected in office visit notes or other objective documents will be noted as such- "handwritten note on cover sheet (telephone call, etc.) without confirmation in office visit note"- but will not constitute actionable information for clinical decision making. Please be prepared to upload or fax medical records supporting the required information on the checklist.

Initial IPM Procedure Request

- Name, office phone number, and fax number of ordering physician
- Member name and ID number
- Requested interventional pain management procedure
- Name of provider office or facility where the service will be performed
- Anticipated date of service- this is required in order to calculate critical clinical timeframes
- Diagnosis, date of onset of back or neck pain
- Physical exam findings related to back/neck pain, intensity, and any neurological deficits
- Recent imaging studies reports if applicable
- Documentation of patient's pain levels (on a scale of 1-10) or impact on functional abilities
- Detailed documentation of the extent, duration, and response to conservative therapy tried for six weeks within the most recent six months. (*Unless medical reason is provided as to why this cannot be done.)
 - Conservative therapy should include a multimodality approach consisting of a combination of active and inactive components. Inactive components such as the following can be utilized:
 - Rest
 - Ice
 - Heat

¹National Imaging Associates, Inc. is a subsidiary of Magellan Healthcare, Inc.

- Modified activities
 - Medical devices
 - Acupuncture
 - stimulators
 - Active modalities may consist of:
 - Physical therapy
 - Physician supervised home exercise program
 - Chiropractic care
 - *Epidural steroid injection: 6 weeks conservative therapy is not a requirement for acute radicular pain.
- Supporting documentation of any prior interventional pain management procedure(s) including the date of the procedure, spinal region, and the effectiveness in reducing pain and improving functional ability

Repeat IPM Procedure Request

- Date of the prior procedure and spinal region treated
 - *There must be a minimum of 14 days between injections
- Updated note (office visit note or telephone encounter) documenting the result of the previous procedure (percentage of pain relief and for how long, effectiveness in reducing the patient's pain and improving functional ability.
- Updated note (office visit note or telephone encounter) reflecting patient's current pain (on a scale of 1-10) or ongoing functional limitations.
- Ongoing conservative therapy measures being done in conjunction with the interventional pain procedure requested

Sample Pain Rating Scales

Visual analogue scale (VAS)

A horizontal line representing a visual analogue scale. At the left end is a green circle with a happy face, labeled "No pain". At the right end is a green circle with a sad face, labeled "Worst pain ever". Below the line, a numerical scale from 0 to 10 is marked with vertical tick marks.

Numerical rating scale (NRS)

PAIN SCORE 0-10 NUMERICAL RATING

0-10 Numerical Rating Scale

A horizontal line representing a numerical rating scale from 0 to 10. The scale is marked with vertical tick marks and numbers. Below the line, the following labels are provided: 0 No Pain, 5 Moderate Pain, and 10 Worst Possible Pain.

Faces rating scale (FRS)

Wong Baker Face Scale

A series of six faces representing different levels of pain. The faces are numbered 0 through 10. Below each face is a corresponding label: 0 NO HURT, 1 HURTS LITTLE BIT, 2 HURTS LITTLE MORE, 3 HURTS EVEN MORE, 4 HURTS WHOLE LOT, and 5 HURTS WORST.