Interim Coverage Policy

for

Sacroiliac Joint Fusion

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I. Introduction

Sacroiliac (SI) joint fusion, or arthrodesis, has been increasingly used in recent years for some forms of low back pain. While there are a number of reasons why pain could originate from the (SI) joint, the following criteria has been adopted by Labor and Industries as an interim coverage policy for consideration of SI Joint Fusion. Our statutory Industrial Insurance Medical Advisory Committee is anticipated to convene in early 2019 to conduct an evidence-based review of this and other spine surgery procedures.

Sacroiliac joint fusion is accomplished through fusing the iliac bone to the sacrum with hardware for stabilization. Prior to SI joint fusion surgery, conservative care measures should be utilized as the first line of treatment. Such treatments could include activity modification, NSAIDs, physical therapy, and injections. If conservative measures fail to provide adequate relief in patients with chronic SI joint pain after at least six months, then surgery may be considered.

II. Review Criteria for Sacroiliac Fusion

A request may be appropriate for the following	**If the patient has the following**	**AND the diagnosis is supported by these clinical findings:**			**AND this has been done**
Surgical Procedure	Diagnosis	Subjective	Objective	Imaging	Non-operative care
Sacroiliac Joint Fusion **Note:** A stepped approach to surgery and recovery **must be in place prior to surgical approval**, and *must include all of the following components*: 1. Post-surgical activation/reconditioning plan documented in the claim file by the surgeon. 2. Return to work/vocational rehabilitation plan documented by AP after review of surgeon's activation plan. 3. Worker agreement to surgeon and AP plans.	A single, documented inciting work related event that creates a force sufficient to cause SI joint disruption or instability	Pain referrable to a SI joint	At least 3 physical provocation tests are positive for pain. Tests may include any of the following: • Gaenselen's maneuver • Compression test • FABER(flexion abdution external rotation) • Thigh thrust • Distraction • Fortin finger test	Diastasis of the pubis symphysis of at least 2.5 cm **OR** Asymmetric widening of the injured SI joint	Failure of six or more months of conservative care directed at successfully treating SI joint ligamentous instability

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