



IEHP UM Subcommittee Approved Authorization Guideline			
<b>Guideline</b>	Genicular Nerve Neurotomy	<b>Guideline #</b>	UM_NEU 02
		<b>Original Effective Date</b>	5/11/2016
<b>Section</b>	Neurology	<b>Revision Date</b>	1/09/19

### COVERAGE POLICY

Based on a review of the currently available literature, there is insufficient evidence to support the use of Genicular Nerve Neurotomy in the treatment of chronic knee pain due to Osteoarthritis.

### COVERAGE LIMITATIONS AND EXCLUSIONS

#### **Non-covered CPT Codes:**

64640, 64999

### ADDITIONAL INFORMATION

Genicular Nerve Neurotomy is a treatment of chronic knee pain due to osteoarthritis. Pain signals are found to arise from the genicular nerves, sensory nerve branches of the tibial, common peroneal and obturator nerves which supply the capsule of the knee joint and intra-articular and extra-articular ligaments. A diagnostic genicular nerve block is first done. If there is sufficient pain relief in the knee, a Genicular Nerve Neurotomy is performed to alleviate the knee pain, thereby restoring function.

A search of the peer-reviewed medical literature demonstrated that there is a lack of adequately designed trials concerning the use of this modality in the treatment of chronic knee pain due to osteoarthritis.

### CLINICAL/REGULATORY RESOURCE

#### **MEDICARE:**

Medicare does not have a National Coverage Determination (NCD) or a Local Coverage Determination (LCD) for California regarding the use of Genicular Nerve Neurotomy for the treatment of chronic knee pain due to Osteoarthritis.

#### **MEDI-CAL:**

There are no relevant Medi-Cal guidelines or policy statements regarding the use of Genicular Nerve Neurotomy for the treatment of chronic knee pain due to Osteoarthritis.

### **MCG REVIEW CRITERIA:**

No guidelines pertaining to the use of genicular nerve neurotomy for treatment of chronic knee pain were noted in a search of MCG review criteria.

### **APOLLO MEDICAL REVIEW CRITERIA GUIDELINES FOR MANAGING CARE:**

There is no discussion of the use of Genicular Nerve Neurotomy for the treatment of chronic knee pain due to Osteoarthritis.

### **BLUE SHIELD:**

Blue Shield of California states, “Radiofrequency ablation of peripheral nerves to treat pain associated with...knee osteoarthritis is considered investigational.”

### **DEFINITION OF TERMS**

**Ablation:** the removal or destruction of a body part or tissue or its function. Ablation may be performed by surgery, hormones, drugs, radiofrequency, heat or other methods.

**Denervation:** also known as ablation.

**Genicular Nerve:** Sensory nerve arising from branches of the tibial, common peroneal and obturator nerves. The tibial and common peroneal nerve arise from the sciatic nerve, while the obturator nerve arises from the anterior division of the L2-L4 spinal nerves.

**Neurotomy:** the destruction of nerves or nerve tissue by heat, cutting or by chemical injection.

**Percutaneous:** a medical procedure where access to tissue is done via a needle puncture of the skin.

**Radiofrequency:** an invasive procedure that involves heating tissue in order to destroy it.

**Thermocoagulation:** also known as ablation, or denervation.

### **REFERENCES**

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