

Clinical Policy: Discography

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[Coding Implications](#)

[Revision Log](#)

Description

In lumbar discography, contrast medium is injected into a lumbar intervertebral disc that is thought to be the cause of low back pain. This procedure is used to reproduce a patient's pain and visualize the disc morphology. Injection pressures are also taken into account when considering whether the test suggests symptomatic disc degeneration.

Policy/Criteria

- I. It is the policy of Pennsylvania Health and Wellness® (PHW) that lumbar discography is **medically necessary** when meeting the following criteria:
 - A. The injection is for diagnostic purposes and other diagnostic tests (i.e., CT, MRI) have failed to provide definitive confirmation of the suspect disc as the source of the pain;
 - B. A detailed psychosocial assessment has been performed with no significant findings of unresolved emotional or psychological problems that abnormally affect perception of chronic pain;
 - C. The injection is performed at 2 levels, with one level serving as a control;
 - D. Chronic discogenic back pain (may extend to buttocks) that interferes with ADLs for at least 6 months;
 - E. Pain is non-radicular;
 - F. Patient has failed to respond to conservative therapy including all of the following:
 1. ≥ 6 weeks physical therapy or prescribed home exercise program;
 2. Non-steroidal anti-inflammatory drug (NSAID) ≥ 3 weeks or NSAID contraindicated or not tolerated;
 3. ≥ 6 weeks activity modification;
 - G. A surgical procedure that is not experimental/investigational is being considered and the patient is eligible for the surgery;
 - H. Member has not had previous surgery on the discs to be injected;
 - I. MRI has confirmed levels of degenerative disc disease and normal discs to use as potential controls.
- II. It is the policy of PHW that cervical and thoracic discography is considered **investigational** because effectiveness has not been established.

Background

Lumbar Discography

Lumbar Discography is a controversial diagnostic test for chronic discogenic low back pain. Proponents argue that recreating the patient's pain makes the test more sensitive and specific than imaging such as radiographs, myelography, and MRI, which identify both symptomatic and asymptomatic abnormalities.¹ However, critics argue that discography lacks reliability, given the absence of a clearly defined gold-standard reference test and the ability of the test to produce pain in patients without any prior history of back pain.^{1,2} Additionally, studies have come to conflicting conclusions regarding the accuracy of lumbar discography in identifying the source

CLINICAL POLICY

Discography

of discogenic pain and in guiding treatment decisions.³⁻⁷ Discography after lumbar discectomy in particular has been noted to produce pain in patients who are otherwise asymptomatic.⁸

Recent guidelines upheld prior statements regarding the unsuitability of discography as a stand-alone test.^{1,9} Its utility lies in its use as a screening tool in conjunction with imaging. Moreover, there is evidence from a prospective cohort study that discography may lead to accelerated disk degeneration such as occurrence of new herniations, loss of disc height, and loss of disc signal intensity.¹⁰

Cervical/Thoracic Discography

While evidence is fair for lumbar discography to identify the source of discogenic pain, for cervical or thoracic discography, it is limited by few studies of poor quality.¹¹⁻¹³

Lumbar discography represents a screening tool for the source of discogenic pain after other sources of lumbar pain have been excluded and when treatment is available.¹¹ For cervical and thoracic pain, discography is not an appropriate diagnostic or screening tool.

Coding Implications

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CPT® Codes	Description
62290	Injection procedure for discography, each level; lumbar
62291	Injection procedure for discography, each level; cervical or thoracic
62292	Injection procedure for chemonucleolysis, including discography, intervertebral disc, single or multiple levels, lumbar
72285	Discography, cervical or thoracic, radiological supervision and interpretation
72295	Discography, lumbar, radiological supervision and interpretation

ICD-10-CM Diagnosis Codes that Support Coverage Criteria

ICD-10-CM Code	Description
M54.5	Low back pain
M54.6	Pain in thoracic spine

Reviews, Revisions, and Approvals	Date	Approval Date

References

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