

HEALTH PLAN POLICY	
Policy Title: Sacroiliac Joint Fusion	Policy Number: MUM59 Revision: B
Department: Medical Management	Sub-Department: Utilization Management
Applies to Product Lines: <input type="checkbox"/> Medicaid <input checked="" type="checkbox"/> USFHP <input type="checkbox"/> Children’s Health Insurance Plan <input checked="" type="checkbox"/> Commercial Insured <input checked="" type="checkbox"/> Health Insurance Exchange <input type="checkbox"/> Non Insured Business <input checked="" type="checkbox"/> Medicare	
Origination/Effective Date: 10/09/2019	
Reviewed Date(s):	Revision Date(s): 08/26/2020, 08/17/2021

SCOPE:

This document addresses surgical fusion of the pelvis (iliac bone) to the spine (sacrum) for treatment of trauma and other orthopedic conditions.

DEFINITIONS AND ACRONYMS:

- **INSITE Study** - Investigation of Sacroiliac Fusion Treatment
- **International Society for Advancement of Spinal Surgery (ISASS)**_
- **North American Spine Society (NASS)**
- **Sacroiliac Joint (SI Joint)**

POLICY:

SI Joint Fusion is medically necessary under the following scenarios:

- 1) Adjuncts to tumor or infectious conditions involving the pelvis/spine area
- 2) Severe traumatic injury to the pelvis
- 3) Multisegmental spinal surgery for kyphosis or scoliosis

Rationale:

SI joint dysfunction is typically characterized by pain in the lower back & hips. It is aggravated by movement of most any kind. It is caused by a variety of conditions including trauma, malignancy, infection or musculoskeletal misalignment. Various secondary considerations include steroid use, Pagets Disease, metabolic disease of bone, rheumatoid disease & osteoporosis. Advanced age and female gender are risk factors. Extensive peer reviewed literature informs the basis of this policy with significant contributions by ISASS & NASS – both professional organizations.

REFERENCES:

- **ISASS 2016** – recommendations for SI Joint Fusion
- **NASS 2015** – coverage recommendations on SI Joint Fusion

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RELATED DOCUMENTS:

None

REVISION HISTORY:

Revision	Date	Description of Change	Committee
New	10/09/2019	Initial release.	Executive Leadership
A	08/26/2020	Yearly review. No change to policy content.	Executive Leadership
B	08/17/2021	Yearly review. No change to policy content.	Executive Leadership