Sample Appeal Letter for Lysis of Adhesions

<Date>

Name
Address
City, State
Attn: Appeal Department

Re: Patient Name
ID#:

To Whom It May Concern:

I am requesting a formal appeal of your denial of Epidural Lysis of Adhesions (Epidural Adhesiolysis) for my patient, (patient name). I have been treating (patient name) for (diagnosis) for the past (duration).

DESCRIBE HISTORY, CONSERVE TRMT, SURGERIES, ETC. – YOU'RE TRYING TO PROVE WHY THIS PATIENT NEEDS/NEEDED THIS PROCEDURE.

Epidural Lysis of Adhesions (Lysis) is an Interventional Pain Management technique which emerged in the late 80’s. To date, there have been in excess of 1.6 million Lysis procedures done in the US and in over 32 countries internationally. Lysis was developed as a means of removing epidural scarring leading directly or indirectly to compression, inflammation, swelling, or a decreased nutritional supply of nerve roots. It utilizes a number of modalities in the effort to break up epidural scarring, including the use of a spring wound catheter, placement of the catheter in the ventro-lateral aspect of the epidural space at the site of the exiting nerve root, and the use of high volumes of injectate, including local anesthetics and saline, either hypertonic or isotonic, along with steroids.

Lysis is a minimally invasive procedure that is a useful, cost effective alternative, providing relief for patients suffering chronic pain as a result of conditions such as failed back surgery, stenosis, radiculopathy, epidural adhesions and/or disc disruption. Typically, additional surgery is not effective in relieving pain after previous surgery. While therapies have been developed to treat pain due to spinal stenosis, no therapy other than Lysis will treat pain due to nerve root adhesions. An added benefit to the Lysis procedure is the lack of serious complications in the aging population. In a 2013 study, results reflect 50% of patients will reduce or resolve their pain at 1 year¹. In a 2012 study reflected an 82% improvement over a 2 year period². In a 2009 peer-reviewed published study, patients who underwent Lysis had a 50% decrease in pain at 1 year⁴. In July 2006, a randomized blinded study was published showing significant alleviation of pain and functional disability in patients with chronic low back pain and sciatica based on disc protrusion/prolapse or failed back surgery at 1 year⁵. In addition to the 6 randomized, controlled, and blinded peer-reviewed published studies, there are over 40 additional peer-reviewed published articles citing outcomes and techniques supporting the effectiveness of this procedure³,⁶.

The CPT code used for billing will be 62264. In addition, billing will be submitted for the epidural catheter outside the global fee with the invoice attached. Reimbursement will be requested for Physician fee, catheter and medications (if you are performing in the office).
Please review all of the attached information for (patient name) (attach patient chart notes, diagnostics, conserve trmt, etc.). I am extremely confident that Epidural Lysis of Adhesions (Epidural Adhesiolysis) will help my patient, thus avoiding a more invasive procedure.

If you have any questions, please feel free to contact me at (.......). Thank you for your consideration.

Sincerely

(Dr. Name)


