



Medical Affairs Policy & Procedure

Title/Service: Occipital Nerve Block

Revised	
Reviewed	02/05/10, 11/18/11
Developed	
Policy Committee Approval	11/18/11

Description:

An occipital nerve block is an injection of a local anesthetic with or without steroid near the occipital nerves that are located on the back of the head above the neck for the management of head pain.

Indications of Coverage:

An occipital nerve block is considered medically necessary for chronic (at least three months in duration) pain consistent with occipital neuralgia (piercing, throbbing, or electric-shock-like chronic pain in the upper neck, back of the head, and behind the ears, usually on one side of the head) when a one-month trial of an oral anti-inflammatory medication (or analgesic medication if anti-inflammatory medications are contraindicated) used on a regular basis has been ineffective.

If the previous injection provided significant (at least 50%) relief for a minimum of four weeks, an additional injection is considered medically necessary.

Limitations of Coverage:

Review contract and endorsements for exclusions and prior authorization or benefit requirements.

If used for a condition/diagnosis other than is listed in the Indications of Coverage, deny as experimental or investigative.

If used for a condition/diagnosis that is listed in the Indications of Coverage, but the criteria are not met, deny as not medically necessary.

Occipital nerve blocks for the management of chronic and migraine headaches in the absence of symptoms consistent with occipital neuralgia are not medically necessary.

More than four injections in a twelve-month period are considered not medically necessary.

Documentation Required:

- Office notes
- Procedure report

Rationale:

Occipital nerve blocks have been used for the management of occipital neuralgia, defined by the National Institute of Neurological Disorders and Stroke (NINDS) as piercing, throbbing, or electric-shock-like chronic pain in the upper neck, back of the head, and behind the ears, usually on one side of the head. Occipital neuralgia is thought to be the result of compression of the occipital nerves. Whether the syndrome exists continues to be a matter of debate and a consensus on the diagnosis and management of the condition has not been reached. Treatment for the condition is largely conservative, although injection therapy and surgical intervention have been utilized. The effectiveness of injection therapy has not been established in peer-reviewed literature, but is widely used.

References:

1. Ashkenazi A, Levin M. Greater occipital nerve block for migraine and other headaches: is it useful? *Curr Pain Headache Rep.* 2007 Jun;11(3):231-5.
2. National Institute of Neurological Disorders and Stroke (NINDS). NINDS Occipital Neuralgia Information Page. Available at: www.ninds.nih.gov/disorders/occipitalneuralgia/occipitalneuralgia.htm. Accessed: 16 Jan 10.
3. Tobin J, Flitman S. Occipital nerve blocks: when and what to inject? *Headache.* 2009 Nov-Dec; 49(10):1521-33.

Approved by the Medical Director