

Cigna Medical Coverage Policies – Musculoskeletal Joint Surgery Quick Reference Guide

Effective January 01, 2016



Instructions for use:

This guide is to support providers and is to be utilized as a tool when submitting clinical information for precertification requests and to improve the precertification process. Providing all of the information listed on this tool does not guarantee approval of the requested procedure(s). All prior authorization requests are reviewed for medical necessity based upon evidence-based medical policies.

Diagnosis/Procedure/Anesthesia/Facility/Implant Information

- Primary Diagnosis Code(s)
- CPT/HCPCS code(s) and modifier and units when applicable
- Anesthesia – general, MAC, regional (specify type), local, other
- Site of Service – inpatient hospital, outpatient hospital, ambulatory surgery center, office
- Implants – Global Industry Classification (GIC) and/or manufacturer and description

Specific Information Related to Requested Procedure

- **Indicate the following information:**
 - Index surgery
 - Revision surgery
 - Staged surgery

- **Signs/Symptoms:**
 - Indicate symptom, problem, condition, diagnosis or other factor that is the reason for the joint surgery procedure
 - Indicate the most recent reported level of pain using the Visual Analog Scale (VAS)
 - Indicate the duration of pain
 - Indicate a description of the symptom(s) including location, quality, severity, timing, context, modifying factors, locking/instability of the joint, mechanical block to joint extension/flexion and any associated signs/symptoms
 - Indicate if the pain is severe, disabling and substantively interferes with the patient's ability to carry out age-appropriate activities of daily living and/or demands of employment, and if so, the duration of disability in months
- **Physical Exam:**
 - Indicate:
 - Body Mass Index (BMI) calculated by actual measurement of the patient's height/weight not as stated by the patient
 - Active/passive joint range of motion and any fixed joint deformities
 - Location of pain to palpation
 - Evidence of a joint effusion
 - Results of provocative testing
 - Detailed neurological and vascular examination of the affected extremity
 - Any other substantive/relevant physical examination findings
- **Past Medical and/or Surgical History:**
 - Prior major illnesses and injuries
 - Prior relevant musculoskeletal surgical procedures
 - Prior surgical complications
 - Prior hospitalizations
 - Current medications
 - Any other pertinent past medical and/or surgical history
- **Treatment:**
 - Since the onset of joint/extremity pain, indicate the following:
 - Length of time the patient has continually participated in a physician-directed physical therapy or home exercise program
 - Medications prescribed for the pain condition and duration of use
 - Indicate type(s) and duration of non-surgical care
 - Indicate response to pain resulting from a recent course of **physician-directed conservative treatment using the Visual Analog Scale**: Unknown, no decrease in pain, 1 point decrease in pain, 2 point decrease in pain, or 3+ point decrease in pain
 - Indicate date(s) and response(s) to pain following the prior named **surgical procedure(s) using the Visual Analog Scale**: Unknown, no decrease in pain, 1 point decrease in pain, 2 point decrease in pain, or 3+ point decrease in pain

- **Prior Imaging:**

- Results and date of prior imaging studies
 - Congenital/acquired/post-traumatic joint/bone deformities
 - Kellgren-Lawrence grade of osteoarthritis identified on recent weight-bearing radiographs
 - Modified Outerbridge Classification of articular cartilage injury identified on arthroscopy
 - Ficat classification of hip osteonecrosis
 - The radiologists' interpretation of any advanced diagnostic studies
 - Any other pertinent results of low-tech or hi-tech diagnostic imaging studies

Additional Clinical Information

- **Co-management:**

- Current management of comorbid medical and behavioral health issues and how these conditions are being medically optimized prior to surgery
- Use and/or abuse of controlled substances—especially opiates