



## Excellus/Univera Joint Services Code List

CPT <sup>®</sup> Code	CPT <sup>®</sup> Code Description	Commercial, CHP, FHP	Medicaid	Medicare
23000	Removal of subdeltoid calcareous deposits, open	PA Medical Necessity Review	Out of Scope	PA Medical Necessity Review
23020	Capsular contracture release (eg, sever type procedure)	PA Medical Necessity Review	Out of Scope	PA Medical Necessity Review
23120	Claviculectomy; partial	PA Medical Necessity Review	Out of Scope	PA Medical Necessity Review
23130	Acromioplasty or acromionectomy, partial, with or without coracoacromial ligament release	PA Medical Necessity Review	Out of Scope	PA Medical Necessity Review
23410	Repair of ruptured musculotendinous cuff (eg, rotator cuff) open; acute	PA Medical Necessity Review	Out of Scope	PA Medical Necessity Review
23412	Repair of ruptured musculotendinous cuff (eg, rotator cuff) open; chronic	PA Medical Necessity Review	Out of Scope	PA Medical Necessity Review
23415	Coracoacromial ligament release, with or without acromioplasty	PA Medical Necessity Review	Out of Scope	PA Medical Necessity Review
23420	Reconstruction of complete shoulder (rotator) cuff avulsion, chronic (includes acromioplasty)	PA Medical Necessity Review	Out of Scope	PA Medical Necessity Review
23430	Tenodesis of long tendon of biceps	PA Medical Necessity Review	Out of Scope	PA Medical Necessity Review
23440	Resection or transplantation of long tendon of biceps	PA Medical Necessity Review	Out of Scope	PA Medical Necessity Review
23450	Capsulorrhaphy, anterior; putti-platt procedure or magnuson type operation	PA Medical Necessity Review	Out of Scope	PA Medical Necessity Review

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23455	Capsulorrhaphy, anterior; with labral repair (eg, bankart procedure)	PA Medical Necessity Review	Out of Scope	PA Medical Necessity Review
23460	Capsulorrhaphy, anterior, any type; with bone block	PA Medical Necessity Review	Out of Scope	PA Medical Necessity Review
23462	Capsulorrhaphy, anterior, any type; with coracoid process transfer	PA Medical Necessity Review	Out of Scope	PA Medical Necessity Review
23465	Capsulorrhaphy, glenohumeral joint, posterior, with or without bone block	PA Medical Necessity Review	Out of Scope	PA Medical Necessity Review
23466	Capsulorrhaphy, glenohumeral joint, any type multi-directional instability	PA Medical Necessity Review	Out of Scope	PA Medical Necessity Review
23470	Arthroplasty, glenohumeral joint; hemiarthroplasty	PA Medical Necessity Review	Out of Scope	PA Medical Necessity Review
23472	Arthroplasty, glenohumeral joint; total shoulder (glenoid and proximal humeral replacement (eg, total shoulder))	PA Medical Necessity Review	Out of Scope	PA Medical Necessity Review
23474	Revision of total shoulder arthroplasty, including allograft when performed; humeral and glenoid component	PA Medical Necessity Review	Out of Scope	PA Medical Necessity Review
27125	Hemiarthroplasty, hip, partial (e.g. femoral stem prosthesis, bipolar arthroplasty	PA Medical Necessity Review	Out of Scope	PA Medical Necessity Review
	Arthroplasty, acetabular and proximal femoral prosthetic replacement (total hip arthroplasty), with or without autograft or allograft	PA Medical Necessity Review	Out of Scope	PA Medical Necessity Review
27132	Conversion of previous hip surgery to total hip arthroplasty, with or without autograft or allograft	PA Medical Necessity Review	Out of Scope	PA Medical Necessity Review
27134	Revision of total hip arthroplasty; both components, with or without autograft or allograft	PA Medical Necessity Review	Out of Scope	PA Medical Necessity Review
27137	Revision of total hip arthroplasty; acetabular component only, with or without autograft or allograft	PA Medical Necessity Review	Out of Scope	PA Medical Necessity Review
27138	Revision of total hip arthroplasty; femoral component only, with or without allograft	PA Medical Necessity Review	Out of Scope	PA Medical Necessity Review
27332	Arthrotomy, with excision of semilunar cartilage (meniscectomy) knee; medial or lateral	PA Medical Necessity Review	Out of Scope	PA Medical Necessity Review

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27333	Arthrotomy, with excision of semilunar cartilage (meniscectomy) knee; medial and lateral	PA Medical Necessity Review	Out of Scope	PA Medical Necessity Review
27334	Arthrotomy, with synovectomy, knee; anterior or posterior	PA Medical Necessity Review	Out of Scope	PA Medical Necessity Review
27335	Arthrotomy, with synovectomy, knee; anterior and posterior including popliteal area	PA Medical Necessity Review	Out of Scope	PA Medical Necessity Review
27403	Arthrotomy with meniscus repair, knee	PA Medical Necessity Review	Out of Scope	PA Medical Necessity Review
27412	Autologous chondrocyte implantation, knee	PA Medical Necessity Review	Out of Scope	PA Medical Necessity Review
27415	Osteochondral allograft, knee, open	PA Medical Necessity Review	Out of Scope	PA Medical Necessity Review
27416	Osteochondral autograft(s), knee, open (eg, mosaicplasty) (includes harvesting of autograft[s])	PA Medical Necessity Review	Out of Scope	PA Medical Necessity Review
27418	Anterior tibial tubercleplasty (eg, maquet type procedure)	PA Medical Necessity Review	Out of Scope	PA Medical Necessity Review
27420	Reconstruction of dislocating patella; (eg, hauser type procedure)	PA Medical Necessity Review	Out of Scope	PA Medical Necessity Review
27422	Reconstruction of dislocating patella; with extensor realignment and/or muscle advancement or release (eg, campbell, goldwaite type procedure)	PA Medical Necessity Review	Out of Scope	PA Medical Necessity Review
27424	Reconstruction of dislocating patella; with patellectomy	PA Medical Necessity Review	Out of Scope	PA Medical Necessity Review
27425	Lateral retinacular release, open	PA Medical Necessity Review	Out of Scope	PA Medical Necessity Review
27427	Ligamentous reconstruction (augmentation), knee; extra-articular	PA Medical Necessity Review	Out of Scope	PA Medical Necessity Review
27428	Ligamentous reconstruction (augmentation), knee; intra-articular (open)	PA Medical Necessity Review	Out of Scope	PA Medical Necessity Review
27429	Ligamentous reconstruction (augmentation), knee; intra-articular (open) and extra-articular	PA Medical Necessity Review	Out of Scope	PA Medical Necessity Review

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27430	Quadricepsplasty (eg, bennett or thompson type)	PA Medical Necessity Review	Out of Scope	PA Medical Necessity Review
27438	Arthroplasty, patella; with prosthesis	PA Medical Necessity Review	Out of Scope	PA Medical Necessity Review
27440	Arthroplasty, knee, tibial plateau	PA Medical Necessity Review	Out of Scope	PA Medical Necessity Review
27441	Arthroplasty, knee, tibial plateau; with debridement and partial synovectomy	PA Medical Necessity Review	Out of Scope	PA Medical Necessity Review
27442	Arthroplasty, femoral condyles or tibial plateau(s), knee;	PA Medical Necessity Review	Out of Scope	PA Medical Necessity Review
27443	Arthroplasty, femoral condyles or tibial plateau(s), knee; with debridement and partial synovectomy	PA Medical Necessity Review	Out of Scope	PA Medical Necessity Review
27446	Arthroplasty, knee, condyle and plateau; medial or lateral compartment	PA Medical Necessity Review	Out of Scope	PA Medical Necessity Review
27447	Arthroplasty, knee, condyle and plateau; medial and lateral compartments with or without patella resurfacing (total knee arthroplasty)	PA Medical Necessity Review	Out of Scope	PA Medical Necessity Review
27486	Revision of total knee arthroplasty, with or without allograft; 1 component	PA Medical Necessity Review	Out of Scope	PA Medical Necessity Review
27487	Revision of total knee arthroplasty, with or without allograft; femoral and entire tibial component	PA Medical Necessity Review	Out of Scope	PA Medical Necessity Review
29805	Arthroscopy, shoulder, diagnostic, with or without synovial biopsy (separate procedure)	PA Medical Necessity Review	Out of Scope	PA Medical Necessity Review
29806	Arthroscopy, shoulder, surgical; capsulorrhaphy	PA Medical Necessity Review	Out of Scope	PA Medical Necessity Review
29807	Arthroscopy, shoulder, surgical; repair of slap lesion	PA Medical Necessity Review	Out of Scope	PA Medical Necessity Review
29819	Arthroscopy, shoulder, surgical; with removal of loose body or foreign body	PA Medical Necessity Review	Out of Scope	PA Medical Necessity Review
29820	Arthroscopy, shoulder, surgical; synovectomy, partial	PA Medical Necessity Review	Out of Scope	PA Medical Necessity Review

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29821	Arthroscopy, shoulder, surgical; synovectomy, complete	PA Medical Necessity Review	Out of Scope	PA Medical Necessity Review
29822	Arthroscopy, Shoulder, Surgical; Debridement, Limited, 1 Or 2 Discrete Structures (Eg, Humeral Bone, Humeral Articular Cartilage, Glenoid Bone, Glenoid Articular Cartilage, Biceps Tendon, Biceps Anchor Complex, Labrum, Articular Capsule, Articular Side Of The Rotator Cuff, Bursal Side Of The Rotator Cuff, Subacromial Bursa, Foreign Body[ies])	PA Medical Necessity Review	Out of Scope	PA Medical Necessity Review
29823	Arthroscopy, Shoulder, Surgical; Debridement, Extensive, 3 Or More Discrete Structures (Eg, Humeral Bone, Humeral Articular Cartilage, Glenoid Bone, Glenoid Articular Cartilage, Biceps Tendon, Biceps Anchor Complex, Labrum, Articular Capsule, Articular Side Of The Rotator Cuff, Bursal Side Of The Rotator Cuff, Subacromial Bursa, Foreign Body[ies])	PA Medical Necessity Review	Out of Scope	PA Medical Necessity Review
29824	Arthroscopy, shoulder, surgical; distal claviculectomy including distal articular surface (mumford procedure)	PA Medical Necessity Review	Out of Scope	PA Medical Necessity Review
29825	Arthroscopy, shoulder, surgical; with lysis and resection of adhesions, with or without manipulation	PA Medical Necessity Review	Out of Scope	PA Medical Necessity Review
29826	Arthroscopy, shoulder, surgical; decompression of subacromial space with partial acromioplasty, with coracoacromial ligament (ie, arch) release, when performed (list separately in addition to code for primary procedure)	PA Medical Necessity Review	Out of Scope	PA Medical Necessity Review
29827	Arthroscopy, shoulder, surgical; with rotator cuff repair	PA Medical Necessity Review	Out of Scope	PA Medical Necessity Review
29828	Arthroscopy, shoulder, surgical; biceps tenodesis	PA Medical Necessity Review	Out of Scope	PA Medical Necessity Review
29860	Arthroscopy, hip, diagnostic with or without synovial biopsy (separate procedure)	PA Medical Necessity Review	Out of Scope	PA Medical Necessity Review
29861	Arthroscopy, hip, surgical; with removal of loose body or foreign body	PA Medical Necessity Review	Out of Scope	PA Medical Necessity Review
29862	Arthroscopy, hip, surgical; with debridement/shaving of articular cartilage (chondroplasty), abrasion arthroplasty, and/or resection of labrum	PA Medical Necessity Review	Out of Scope	PA Medical Necessity Review
29863	Arthroscopy, hip, surgical; with synovectomy	PA Medical Necessity Review	Out of Scope	PA Medical Necessity Review
29866	Arthroscopy, knee, surgical; osteochondral autograft(s) (eg, mosaicplasty) (includes harvesting of the autograft[s])	PA Medical Necessity Review	Out of Scope	PA Medical Necessity Review
29867	Arthroscopy, knee, surgical; osteochondral allograft (eg, mosaicplasty)	PA Medical Necessity Review	Out of Scope	PA Medical Necessity Review

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29868	Arthroscopy, knee, surgical; meniscal transplantation (includes arthrotomy for meniscal insertion), medial or lateral	PA Medical Necessity Review	Out of Scope	PA Medical Necessity Review
29870	Arthroscopy, knee, diagnostic, with or without synovial biopsy (separate procedure)	PA Medical Necessity Review	Out of Scope	PA Medical Necessity Review
29871	Arthroscopy, knee, surgical; for infection, lavage and drainage	PA Medical Necessity Review	Out of Scope	PA Medical Necessity Review
29873	Arthroscopy, knee, surgical; with lateral release	PA Medical Necessity Review	Out of Scope	PA Medical Necessity Review
29874	Arthroscopy, knee, surgical; for removal of loose body or foreign body (eg, osteochondritis dissecans fragmentation, chondral fragmentation)	PA Medical Necessity Review	Out of Scope	PA Medical Necessity Review
29875	Arthroscopy, knee, surgical; synovectomy, limited (eg, plica or shelf resection) (separate procedure)	PA Medical Necessity Review	Out of Scope	PA Medical Necessity Review
29876	Arthroscopy, knee, surgical; synovectomy, major, 2 or more compartments (eg, medial or lateral)	PA Medical Necessity Review	Out of Scope	PA Medical Necessity Review
29877	Arthroscopy, knee, surgical; debridement/shaving of articular cartilage (chondroplasty)	PA Medical Necessity Review	Out of Scope	PA Medical Necessity Review
29879	Arthroscopy, knee, surgical; abrasion arthroplasty (includes chondroplasty where necessary) or multiple drilling or microfracture	PA Medical Necessity Review	Out of Scope	PA Medical Necessity Review
29880	Arthroscopy, knee, surgical; with meniscectomy (medial AND lateral, including any meniscal shaving) including debridement/shaving of articular cartilage (chondroplasty), same or separate compartment(s), when performed	PA Medical Necessity Review	Out of Scope	PA Medical Necessity Review
29881	Arthroscopy, knee, surgical; with meniscectomy (medial OR lateral, including any meniscal shaving) including debridement/shaving of articular cartilage (chondroplasty), same or separate compartment(s), when performed	PA Medical Necessity Review	Out of Scope	PA Medical Necessity Review
29882	Arthroscopy, knee, surgical; with meniscus repair (medial OR lateral)	PA Medical Necessity Review	Out of Scope	PA Medical Necessity Review
29883	Arthroscopy, knee, surgical; with meniscus repair (medial AND lateral)	PA Medical Necessity Review	Out of Scope	PA Medical Necessity Review
29884	Arthroscopy, knee, surgical; with lysis of adhesions, with or without manipulation (separate procedure)	PA Medical Necessity Review	Out of Scope	PA Medical Necessity Review
29885	Arthroscopy, knee, surgical; drilling for osteochondritis dissecans with bone grafting, with or without internal fixation (including debridement of base of lesion)	PA Medical Necessity Review	Out of Scope	PA Medical Necessity Review

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29886	Arthroscopy, knee, surgical; drilling for intact osteochondritis dissecans lesion	PA Medical Necessity Review	Out of Scope	PA Medical Necessity Review
29887	Arthroscopy, knee, surgical; drilling for intact osteochondritis dissecans lesion with internal fixation	PA Medical Necessity Review	Out of Scope	PA Medical Necessity Review
29888	Arthroscopically aided anterior cruciate ligament repair/augmentation or reconstruction	PA Medical Necessity Review	Out of Scope	PA Medical Necessity Review
29889	Arthroscopically aided posterior cruciate ligament repair/augmentation or reconstruction	PA Medical Necessity Review	Out of Scope	PA Medical Necessity Review
29914	Arthroscopy, hip, surgical; with femoroplasty (ie, treatment of cam lesion)	PA Medical Necessity Review	Out of Scope	PA Medical Necessity Review
29915	Arthroscopy, hip, surgical; with acetabuloplasty (ie, treatment of pincer lesion)	PA Medical Necessity Review	Out of Scope	PA Medical Necessity Review
29916	Arthroscopy, hip, surgical; with labral repair	PA Medical Necessity Review	Out of Scope	PA Medical Necessity Review
64628	Thermal destruction of intraosseous basivertebral nerve, including all imaging guidance; first 2 vertebral bodies, lumbar or sacral	Investigational	Out of Scope	Investigational
(+)64629	Thermal destruction of intraosseous basivertebral nerve, including all imaging guidance; each additional vertebral body, lumbar or sacral (List separately in addition to code for primary procedure)	Investigational	Out of Scope	Investigational
0809T	Arthrodesis, sacroiliac joint, percutaneous or minimally invasive (indirect visualization), with image guidance, placement of transfixing device(s) and intra-articular implant(s), including allograft or synthetic device(s)	Excluded from Program	Excluded from Program	Excluded from Program
S2118	Metal-on-metal total hip resurfacing, including acetabular and femoral components	PA Medical Necessity Review	Out of Scope	PA Medical Necessity Review

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