

HealthNet

Autologous Chondrocyte Implantation—Pre-authorization Checklist

The following checklist reflects the minimum requirements that the plan will need at the time of pre-authorization. Failure to include all of this information in the pre-authorization request or failure to make sure that all 'no' answers are fully addressed in the pre-authorization request will significantly increase the likelihood that the pre-authorization request will be denied or significantly delayed.

Patient age between 15 and 55 years (Adolescent patients should be skeletally mature with documented closure of growth plates if under 18 years old.)	<input type="checkbox"/> Yes <input type="checkbox"/> No
Disabling symptoms such as locking, swelling or knee pain that is unresponsive to conservative treatment for a minimum of 2 months (such as medication or physical therapy)	<input type="checkbox"/> Yes <input type="checkbox"/> No
Unresponsive to prior arthroscopic or other surgical repair	<input type="checkbox"/> Yes <input type="checkbox"/> No
Focal full-thickness (Grade III or IV) unipolar lesion of a weight bearing surface of femoral condyles or trochlea	<input type="checkbox"/> Yes <input type="checkbox"/> No
Defect size 1 cm ² to 10 cm ²	<input type="checkbox"/> Yes <input type="checkbox"/> No
Knee is stable with intact menisci and ligaments, has normal joint space by X-ray, and good alignment (a corrective procedure may be performed in conjunction with ACI).	<input type="checkbox"/> Yes <input type="checkbox"/> No
Surgery is not intended to treat osteoarthritis of the knee	<input type="checkbox"/> Yes <input type="checkbox"/> No
Patient is willing to comply with prescribed post-operative rehabilitation program	<input type="checkbox"/> Yes <input type="checkbox"/> No
Body mass index less than 35	<input type="checkbox"/> Yes <input type="checkbox"/> No

All 'no' answers must be fully addressed at time of pre-authorization.

The reimbursement material contained in this guide represents our current (as of April 24, 2020) understanding of the pre-authorization checklists reflected in various payer policies. Many of the topics covered in this guide are complex and all are subject to change beyond our control. Healthcare professionals are responsible for keeping current and complying with reimbursement-related rules and regulations. This information is not intended to be directive, nor does the use of the recommended criteria guarantee reimbursement. Providers are responsible for the accuracy of any claims, invoices and related documentation submitted to payers.