## Blue Cross Blue Shield of Michigan Blue Care Network (EFFECTIVE 11/2007)

## 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.

Diagnosis of acute or traumatic injury to the knee joint	□ Yes □ No
Small to medium size hyaline cartilage lesions (1-10 cm²)	□ Yes □ No
Patient between ages of 15-55	□ Yes □ No
Inadequate response to prior arthroscopy or other surgical procedures	□ Yes □ No
Significant symptoms of pain, swelling, catching and limitation of daily or recreational activities	□ Yes □ No
When total knee replacement is not a clinically acceptable alternative	□ Yes □ No
Confirm absence of:  Use as a first line treatment Infection at operative sites Osteoarthritis Inflammatory joint disease Allergy to gentamicin Sensitivity to bovine material Unstable knee Abnormal distribution of weight within the joint Previous malignancy in the bone, cartilage, fat, or muscle of the treated limb Kissing lesions (where opposing articular cartilage surfaces meet abnormally, e.g., patella and femur or femur and tibia) Previous total meniscectomy	□ Yes □ No

All 'no' answers <u>must</u> be fully addressed at time of pre-authorization.

The reimbursement material contained in this guide represents our current (as of January 2024) 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. Nothing contained herein is intended, nor should it be construed as, to suggest a guarantee of coverage or reimbursement for any product or service. Check with the individual insurance provider regarding coverage. Providers should exercise independent clinical judgment when submitting claims to reflect accurately the services rendered to individual patients.