

Core Decompression of the Knee, Ankle, Elbow and Shoulder, Surgical 214

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Effective Date 1/1/2026

Next Review Date 9/2026

Coverage Policy Surgical 214

Version 6

Member-specific benefits take precedence over medical policy and benefits may vary across plans. Refer to the individual's benefit plan for details*.

Description of Item or Service:

Core decompression consists of drilling one or more small channels into the dead bone to decrease pressure, restoring blood flow and stimulating new bone growth.

Clinical Indications and Criteria:

Core decompression is considered **not medically necessary** for any use other than those indicated in clinical criteria, to include but not limited to:

- Knee
- Ankle
- Elbow
- Shoulder

Document History:

Revised Dates:

- 2025: September – Implementation date of January 1, 2026. Annual review completed, no changes to criteria, updated to title and policy formatting.
- 2025: January – Procedure coding updated to align with service authorization changes.
- 2021: December
- 2020: February
- 2019: November

Reviewed Dates:

- 2024: September – no changes references updated
- 2023: September
- 2022: September

Origination Date: November 2018

Coding Information:**Medically necessary with criteria:**

Coding	Description
	None

Considered Not Medically Necessary:

Coding	Description
23929	Unlisted procedure, shoulder
24999	Unlisted procedure, humerus or elbow
27599	Unlisted procedure, femur or knee
27899	Unlisted procedure, leg or ankle

The preceding codes for treatments and procedures applicable to this policy are included above for informational purposes only. Inclusion or exclusion of a procedure, diagnosis or device code(s) does not constitute or imply member coverage or provider reimbursement policy.

Special Notes: *

- Coverage: See the appropriate benefit document for specific coverage determination. Member specific benefits take precedence over medical policy.
- Application to products: Policy is applicable to Sentara Health Plan Medicare products.
- Authorization requirements: Pre-certification by the Plan is required.
- Special Notes:
 - Medicare:
 - This medical policy expresses Sentara Health Plan's determination of medical necessity of services, and they are based upon a review of currently available clinical information. Medical policies are not a substitute for clinical judgment or for any prior authorization requirements of the health plan. These policies are not an explanation of benefits.
 - Medical policies can be highly technical and complex and are provided here for informational purposes. These medical policies are intended for use by health care professionals. The medical policies do not constitute medical advice or medical care. Treating health care professionals are solely responsible for diagnosis, treatment and medical advice. Sentara Health Plan members should discuss the information in the medical policies with their treating health care professionals. Medical technology is constantly evolving and these medical policies are subject to change without notice, although Sentara Health Plan will notify providers as required in advance of changes that could have a negative impact on benefits.

References:

Specialty Association Guidelines; Government Regulations; Winifred S. Hayes, Inc; UpToDate; Literature Review; Specialty Advisors; National Coverage Determination (NCD); Local Coverage Determination (LCD).

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(2025). Retrieved 8 2025, from Hayes: <https://evidence.hayesinc.com/search?q=%257B%2522text%2522:%2522Core%2520Decompression%2522,%2522title%2522:null,%2522termsource%2522:%2522searchbar%2522,%2522page%2522:%257B%2522page%2522:0,%2522size%2522:50%257D,%2522type%2522:%2522all%2522,%2522sources>

(2025). Retrieved 8 2025, from NCCN: https://www.nccn.org/guidelines/category_1

(2025). Retrieved 8 2025, from American Academy of Orthopaedic Surgeons (AAOS): <https://www.aaos.org/search/?q=Core&wst=867b245d187a3c5c4ef5ee723ed2c519>

Carelon. (2025, 1). Retrieved 8 2025, from Anthem: <https://guidelines.carelonmedicalbenefitsmanagement.com/joint-surgery-2024-11-17-updated-2025-01-01/>

Core Decompression. (2025). Retrieved 8 2025, from UpToDate: https://www.uptodate.com/contents/search?search=Core%20Decompression&sp=0&searchType=PLAIN_TEXT&source=USER_INPUT&searchControl=TOP_PULLDOWN&autoComplete=false

Keywords:

Surgical 214

Core Decompression for Avascular Necrosis, SHP Surgical 214, drilling, bone, bone destruction, osteonecrosis, diseased tissue