

Core Decompression for Avascular Necrosis of the Knee, Ankle, Elbow and Shoulder

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

Purpose:

This policy addresses Core Decompression for Avascular Necrosis of the Knee, Ankle, Elbow and Shoulder surgery.

For Hip Core Decompression, refer to Milliman (MCG) Guidelines. •

Description & Definitions:

Core decompression consists of drilling one or more small channels into the dead bone to decrease pressure within the bone by restoring blood flow.

Criteria:

Core Decompression for Avascular Necrosis of the Knee, Ankle, Elbow and Shoulder is considered not medically necessary for any indication.

Coding:

Medically nece	ssary 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

Document History:

Revised Dates:

- 2021: December
- 2020: February
- 2019: November

Reviewed Dates:

- 2023: September
- 2022: September

Effective Date:

• November 2018

References:

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

(n.d.). Retrieved Aug 28, 2023, from Hayes:

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(2023). Retrieved Aug 28, 2023, from MCG 27th Edition: https://careweb.careguidelines.com/ed27/index.html

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Special Notes: *

This medical policy expresses Sentara Health Plan's determination of medically 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,

Surgical 214

although Sentara Health Plan will notify providers as required in advance of changes that could have a negative impact on benefits.

Keywords:

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