
CMS Manual System

Pub. 100-03 Medicare National Coverage Determinations

Department of Health &
Human Services (DHHS)
Centers for Medicare &
Medicaid Services (CMS)

Transmittal 14

Date: JUNE 10, 2004

CHANGE REQUEST 3281

I. SUMMARY OF CHANGES: Arthroscopic lavage alone for treatment of osteoarthritis of the knee, and arthroscopic debridement for presentation of knee pain only or arthroscopic debridement and lavage with or without debridement for patients with severe osteoarthritis of the knee are noncovered. All other indications of debridement for the subpopulation of patients without severe osteoarthritis of the knee who present with symptoms other than pain alone remain at contractor discretion.

NEW/REVISED MATERIAL - EFFECTIVE DATE: June 11, 2004

***IMPLEMENTATION DATE: July 11, 2004**

(This revision to §150.9 of Pub. 100-03 is a national coverage determination (NCD). NCDs are binding on all carriers, fiscal intermediaries, quality improvement organizations, health maintenance organizations, competitive medical plans, and health care prepayment plans. Under 42 CFR 422.256(b), an NCD that expands coverage is also binding on Medicare Advantage Organizations. In addition, an administrative law judge may not review an NCD. (See §1869(f)(1)(A)(i) of the Social Security Act.)

Disclaimer for manual changes only: The revision date and transmittal number apply only to the red italicized material. Any other material was previously published and remains unchanged. However, if this revision contains a table of contents, you will only receive the new/revised information, and not the entire table of contents.

II. CHANGES IN MANUAL INSTRUCTIONS: (N/A if manual not updated.)
(R = REVISED, N = NEW, D = DELETED – (Only One Per Row.)

R/N/D	CHAPTER/SECTION/SUBSECTION/TITLE
R	1/Table of Contents
R	1/150.9/Arthroscopic Lavage and Arthroscopic Debridement for the Osteoarthritic Knee

***III. FUNDING:**

These instructions shall be implemented within your current operating budget.

IV. ATTACHMENTS:

X	Business Requirements
X	Manual Instruction
	Confidential Requirements
	One-Time Notification
	Recurring Update Notification

*Medicare contractors only

Attachment - Business Requirements

Pub. 100-03	Transmittal: 14	Date: June 10, 2004	Change Request 3281
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SUBJECT: Arthroscopic Lavage and Arthroscopic Debridement for the Osteoarthritic Knee

I. GENERAL INFORMATION

A. Background: Prior to this instruction, there was no national Medicare coverage determination related to arthroscopic lavage and/or debridement of the osteoarthritic knee. Therefore, coverage of these procedures was determined by the Medicare local contractors. Upon review of these procedures indicated above, CMS determined that they are not reasonable and necessary under section 1861(a) of the Social Security Act, and are therefore, nationally noncovered with specific indications left to local contractor discretion.

B. Policy: (1) Arthroscopic lavage alone for treatment of osteoarthritis of the knee, (2) arthroscopic debridement for presentation of knee pain only, or (3) arthroscopic debridement, and lavage with or without debridement, for patients with severe osteoarthritis of the knee are now nationally noncovered. All other indications of debridement for the subpopulation of patients without severe osteoarthritis of the knee who present with symptoms other than pain alone remain at contractor discretion.

C. Provider Education: A provider education article related to this instruction will be available at <http://www.cms.hhs.gov/medlearn/matters> shortly after the CR is released. You will receive notification of the article release via the established "medlearn matters" listserv. Contractors shall post this article, or a direct link to this article, on their Web site and include information about it in a listserv message within one week of the availability of the provider education article. In addition, the provider education article must be included in your next regularly scheduled bulletin.

II. BUSINESS REQUIREMENTS

"Shall" denotes a mandatory requirement

"Should" denotes an optional requirement

Requirement #	Requirements	Responsibility
3281.1	Arthroscopic lavage used alone for the osteoarthritic knee is not considered a reasonable and necessary treatment and is not nationally covered by the Medicare program.	FIs and Local Part B Carriers
3281.2	Arthroscopic debridement for osteoarthritic patients presenting with knee pain only is not considered a reasonable and necessary treatment and is not nationally covered by the Medicare program.	FIs and Local Part B Carriers
3281.3	Arthroscopic debridement, and lavage with or without debridement, for patients presenting	FIs and Local Part B Carriers

	with severe osteoarthritis (defined in the Outerbridge classification scale, grades III and IV, is not considered a reasonable and necessary treatment and is not nationally covered by the Medicare program.	
3281.4	Apart from the nationally noncovered indications in BR's 3281.1, 3281.2, and 3281.3, all other indications of debridement for the subpopulation of patients without severe osteoarthritis of the knee who present with symptoms other than pain alone remain at local contractor discretion.	FIs and Local Part B Carriers
3281.5	Medicare contractors may require submission of one or all of the following documents to define a patient's knee condition: (1) operative notes, (2) reports of standing x-rays, or (3) arthroscopy results.	FIs and Local Part B Carriers

III. SUPPORTING INFORMATION AND POSSIBLE DESIGN CONSIDERATIONS

A. Other Instructions: N/A

X-Ref Requirement #	Instructions

B. Design Considerations: N/A

X-Ref Requirement #	Recommendation for Medicare System Requirements

C. Interfaces: N/A

D. Contractor Financial Reporting /Workload Impact: N/A

E. Dependencies: N/A

F. Testing Considerations: N/A

IV. SCHEDULE, CONTACTS, AND FUNDING

Effective Date: June 11, 2004 Implementation Date: July 11, 2004 Pre-Implementation Contact(s): Niccole Corbin, x62273, Pat Brocato-Simons, x60261 Post-Implementation Contact(s): Same as above.	These instructions shall be implemented within your current operating budget.
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Medicare National Coverage Determinations Manual

Chapter 1 - Coverage Determinations

Table of Contents

(Rev. 14, 06-10-04)

150.9 – Arthroscopic Lavage and Arthroscopic Debridement for the Osteoarthritic Knee

150.9 - Arthroscopic Lavage and Arthroscopic Debridement for the Osteoarthritic Knee (Effective June 11, 2004)

(Rev. 14, 06-10-04)

Arthroscopy is a surgical procedure that allows the direct visualization of the interior joint space. In addition to providing visualization, arthroscopy enables the process of joint cleansing through the use of lavage or irrigation. Lavage alone may involve either large or small volume saline irrigation of the knee by arthroscopy. Although generally performed to reduce pain and improve function, current practice does not recognize the benefit of lavage alone for the reduction of mechanical symptoms. Arthroscopy also permits the removal of any loose bodies from the interior joint space, a procedure termed debridement. Debridement, when used alone or not otherwise specified, may include low volume lavage or washout. Osteoarthritis is a chronic and painful joint disease caused by degeneration. The American College of Rheumatology defines a patient diagnosis of osteoarthritis of the knee as presenting with pain, and meeting at least 5 of the following criteria:

- Over 50 years of age;*
- Less than 30 minutes of morning stiffness;*
- Crepitus (noisy, grating sound) on active motion;*
- Bony tenderness;*
- Bony enlargement;*
- No palpable warmth of synovium;*
- ESR <40mm/hr;*
- Rheumatoid Factor <1:40; or,*
- Synovial fluid signs.*

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A. Nationally Covered Indications

Not applicable.

B. Nationally Noncovered Indications

The clinical effectiveness of arthroscopic lavage and arthroscopic debridement for the severe osteoarthritic knee has not been verified by scientifically controlled studies. After thorough discussions with clinical investigators, the orthopedic community, and other interested parties, CMS determines that the following procedures are not considered reasonable or necessary in treatment of the osteoarthritic knee and are not covered by the Medicare program:

- Arthroscopic lavage used alone for the osteoarthritic knee;*
- Arthroscopic debridement for osteoarthritic patients presenting with knee pain only;*
or,

- *Arthroscopic debridement and lavage with or without debridement for patients presenting with severe osteoarthritis ((Severe osteoarthritis is defined in the Outerbridge classification scale, grades III and IV. Outerbridge is the most commonly used clinical scale that classifies the severity of joint degeneration of the knee by compartments and grades. Grade I is defined as softening or blistering of joint cartilage. Grade II is defined as fragmentation or fissuring in an area <1 cm. Grade III presents clinically with cartilage fragmentation or fissuring in an area >1 cm. Grade IV refers to cartilage erosion down to the bone. Grades III and IV are characteristic of severe osteoarthritis.)*

C. Other

Apart from the noncovered indications above for arthroscopic lavage and/or arthroscopic debridement of the osteoarthritic knee, all other indications of debridement for the subpopulation of patients without severe osteoarthritis of the knee who present with symptoms other than pain alone; i.e., (1) mechanical symptoms that include, but are not limited to, locking, snapping, or popping (2) limb and knee joint alignment, and (3) less severe and/or early degenerative arthritis, remain at local contractor discretion. Medicare contractors may require submission of one or all of the following documents to define the patient's knee condition:

- *Operative notes,*
- *Reports of standing x-rays, or,*
- *Arthroscopy results.*

(This NCD last reviewed June 2004.)