CHANGES IN COVERAGE
VISCOSUPPLEMENTATION OF THE KNEE

Effective April 1, 2014 Healthfirst limited reimbursement for Viscosupplementation, service code 20610, for Healthfirst Medicaid and Family Health Plus members based off the NYS Medicaid decision to **no longer cover this service** for enrollees with a diagnosis of osteoarthritis of the knee.

For other diagnoses other than osteoarthritis of the knee, Healthfirst covers Viscosupplementation for Healthfirst Medicaid and Family Health Plus members when proper authorization is obtained.

More information on this can be found in the March 2014 issue of NYS Medicaid Updates on the NYSDOH website.

Effective September 1, 2014 Healthfirst will **require authorization** for related service codes 20600 and 20605 for Healthfirst Medicaid and Family Health Plus members.

The table below details these coverage changes.

Service Code	Service Code Description	Authorization REQUIREMENTS & EXCEPTIONS	Effective Date
20610	Arthrocentesis, aspiration and/or injection; major joint or bursa (eg, shoulder, hip, knee joint, subacromial bursa).	**Service Not Covered** for Medicaid and FHP with Osteoarthritis Diagnosis when billed with the following diagnosis codes: **Applicable Osteoarthritis Diagnosis Codes:** • 715.16 • 715.26 • 715.36 • 715.96 **Service Covered only with Authorization** for Medicaid and FHP when billed with all other diagnosis (NOT listed above).	**04/01/2014**
20600	Arthrocentesis, aspiration and/or injection; small joint or bursa (eg, fingers, toes)	**Service Covered only with Authorization** for Medicaid and FHP	**09/01/2014**
20605	Arthrocentesis, aspiration and/or injection; intermediate joint or bursa (eg, temporomandibular, acromioclavicular, wrist, elbow or ankle, olecranon bursa).	**Service Covered only with Authorization** for Medicaid and FHP	**09/01/2014**

Viscosupplementation of the Knee: Non-Coverage Decision

Effective April 1, 2014, for Medicaid fee-for-service (FFS) enrollees, Medicaid Managed Care (MMC) enrollees and Family Health Plus (FHPlus) enrollees, New York State (NYS) Medicaid (MA) will limit reimbursement for viscosupplementation of the knee. Specifically, NYS Medicaid will no longer cover viscosupplementation of the knee for an enrollee with a diagnosis of osteoarthritis of the knee. All other diagnoses associated with viscosupplementation will continue to be reimbursed.

DESCRIPTION OF PROCEDURE OR SERVICE: Viscosupplementation of the knee is a procedure in which a gel-like fluid called hyaluronic acid is injected into the knee joint. Hyaluronic acid is a naturally occurring substance found in the synovial (joint) fluid. Individuals with osteoarthritis ("wear-and-tear" arthritis) of the knee have a lower-than-normal concentration of hyaluronic acid in their joints.

BACKGROUND: Based on the current available evidence, NYS Medicaid will no longer cover viscosupplementation of the knee to an enrollee with a diagnosis of osteoarthritis of the knee. This coverage decision was based on research presented which included the potential harms attached to viscosupplemtation (including joint infection, hematoma, and inflammation), and the fact that viscosupplementation is only marginally effective in practice.

- **The following CPT code is associated with the non-coverage decision:**
  - CPT 20610 – Arthrocentesis, aspiration and/or injection: Major joint or bursa (e.g., shoulder, hip, knee joint, subacromial bursa).
- **The following ICD-9 diagnoses codes are associated with the non-coverage decision:**
  - ICD-9: 715.16
  - ICD-9: 715.26
  - ICD-9: 715.36
  - ICD-9: 715.96
- **There will be no reimbursement provided by NYS Medicaid when the following five medication codes are reported with CPT 20610 and the ICD-9 diagnoses codes listed above:**
  - J7321
  - J7323
  - J7324
  - J7325
  - J7326

Questions regarding Medicaid FFS policy should be directed to the Division of Program Development and Management at (518) 473-2160. Questions regarding MMC and FHPlus reimbursement and/or documentation requirements should be directed to the enrollee's MMC or FHPlus plan.