

# Blue Cross Blue Shield of Florida

## 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.

Skeletally mature adult and less than 50 years of age	<input type="checkbox"/> Yes <input type="checkbox"/> No
MRI results confirming full thickness chondral or osteochondral defect greater than 2.5 cm <sup>2</sup>	<input type="checkbox"/> Yes <input type="checkbox"/> No
Symptomatic for a minimum of 6 months (pain, swelling, locking/catching, limited range of motion, mechanical symptoms of popping)	<input type="checkbox"/> Yes <input type="checkbox"/> No
BMI less than 35	<input type="checkbox"/> Yes <input type="checkbox"/> No
Failure of at least 6 months of non-operative treatment including at least 2 of the following: <ul style="list-style-type: none"> <li>• Rest of activity modification</li> <li>• Ice/heat</li> <li>• Protected weight bearing</li> <li>• Pharmacologic treatment</li> <li>• Brace/orthosis</li> <li>• Physical therapy modalities</li> <li>• Supervised home exercise</li> <li>• Weight optimization</li> <li>• Corticosteroid injection</li> <li>• MRI shows no evidence of osteoarthritis (greater than Kellgren-Lawrence Grade 2)</li> <li>• No prior meniscectomy in the same compartment unless concurrent or staged meniscal transplant planned/performed</li> </ul>	<input type="checkbox"/> Yes <input type="checkbox"/> No

**All 'no' answers must be fully addressed at time of pre-authorization.**

The reimbursement material contained in this guide represents our current (as of July 23, 2018) 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. This information is not intended to be directive, nor does the use of the recommended criteria guarantee reimbursement. Providers are responsible for the accuracy of any claims, invoices and related documentation submitted to payers.