

# Authorization criteria: Hip replacement surgery procedure, initial

**For Blue Care Network HMO<sup>SM</sup> (commercial) and BCN Advantage<sup>SM</sup> members  
For Blue Cross Medicare Plus Blue<sup>SM</sup> PPO members**

Clinical review is required for adult members (age  $\geq 18$ ). The medical necessity criteria apply to different lines of business on different effective dates, based on when the questionnaire associated with the criteria is available in the e-referral system. The criteria are outlined below.

CPT code: \*27130 and \*27132

## **For any indication**

The presence of any of the following conditions can cause increase wear of the component or increased risk of component loosening. If any of the following conditions are present, review will be required:

1. Charcot joint OR
2. Heavy physical labor OR
3. Age  $< 50$  OR
4. Active infection excluding bacteriuria (absolute contraindication) OR
5. Previous infection (relative contraindication)

## **Bone tumor by imaging**

The presence of a bone tumor identified by imaging AND no active infection

## **Acute hip fracture**

Patient has no active infection excluding bacteriuria AND ONE of the following must be met:

1. Comminuted or impacted acetabular fracture diagnosed by imaging
2. Displaced femoral head or neck fracture
3. Intertrochanter or subtrochanteric fracture and repair failed or not feasible
4. Arthritis of acetabulum or femoral head by X-ray where TWO OR MORE of the following are present:
  - a. Subchondral cysts
  - b. Subchondral sclerosis
  - c. Marginal erosions
  - d. Periarticular osteophytes
  - e. Periarticular osteopenia
  - f. Joint subluxation
  - g. Joint space narrowing

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## **Avascular necrosis (osteonecrosis) of the femoral head**

ALL of the following must be met:

1. There is avascular necrosis (osteonecrosis) of the femoral head by imaging.
2. There is no active infection excluding bacteriuria.
3. AT LEAST TWO of the following are present:
  - a. Hip pain increases with initiation of activity
  - b. Hip pain increases with weight bearing
  - c. Hip pain interferes with ADLs
  - d. Hip pain with (active or passive) range of motion
4. There is EITHER:
  - a. Limited (active or passive) range of motion OR
  - b. Antalgic gait (limp where weight-bearing occurs for the shortest possible time on the affected leg)
5. There is EITHER:
  - a. Stage III or Stage IV collapse of the femoral head OR
  - b. Continued symptoms or findings after treatment with ALL of the following:
    - i. NSAIDs or acetaminophen for at least 3 weeks AND
    - ii. Physician directed home exercise, or PT for at least 12 weeks AND
    - iii. Activity modification for at least 12 weeks

## **Nonunion or malunion of articular fracture**

Symptomatic nonunion or malunion of fracture by imaging and no active infection excluding bacteriuria may be approved

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## **Osteoarthritis or posttraumatic arthritis**

ALL of the following must be met:

1. There is no active infection excluding bacteriuria.
2. TWO OR MORE of the following symptoms are present:
  - a. Hip pain interferes with ADLs
  - b. Hip pain increases with weight bearing
  - c. Hip pain increases with initiation of activity
  - d. Hip pain with (active or passive) range of motion
3. BOTH of the following are present:
  - a. Limited (active or passive) range of motion AND
  - b. Antalgic gait (limp where weight bearing occurs for the shortest possible time on the affected leg)
4. EITHER of the following are present:
  - a. Bone-on-bone contact by imaging OR
  - b. Arthritis of the hip by X-ray that fails to respond to conservative treatment, as indicated by BOTH of the following:
    - i. TWO OR MORE of the following five imaging findings are present:
      1. Subchondral cysts
      2. Subchondral sclerosis
      3. Periarticular osteophytes
      4. Joint subluxation
      5. Joint space narrowing
    - ii. Continued symptoms or findings after treatment with EACH of the following:
      1. NSAIDs or acetaminophen for at least 3 weeks AND
      2. Physician-directed home exercise or OT or PT for at least 12 weeks AND
      3. Activity modification for at least 12 weeks

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## Rheumatoid arthritis

ALL of the following must be met:

1. There is no active infection excluding bacteriuria.
2. TWO OR MORE of the following are present:
  - a. Hip pain interferes with ADLs
  - b. Hip pain increases with initiation of activity
  - c. Hip pain increases with weight bearing
  - d. Hip pain with (active or passive) range of motion
  - e. Pain at night
3. BOTH of the following are present:
  - a. Limited (active or passive) range of motion AND
  - b. Antalgic gait (limp where weight bearing occurs for the shortest possible time on the affected leg)
4. Arthritis by imaging with TWO OR MORE of the following five imaging findings are present:
  - a. Subchondral cysts
  - b. Marginal erosions
  - c. Periarticular osteophytes
  - d. Joint space narrowing
  - e. Joint subluxation
5. Continued symptoms or findings after treatment within the last year with ALL of the following:
  - a. Disease-specific treatment (that is, with DMARDs, biologics, methotrexate, glucocorticoids) for at least 12 weeks AND
  - b. Physician directed home exercise, or PT for at least 12 weeks AND
  - c. Activity modification for at least 12 weeks

## References

McKesson's InterQual<sup>®</sup> 2017 Procedures Adult Criteria, Joint Replacement, Hip