



August 05, 2020

**Re: Musculoskeletal total knee replacement and total hip replacement coverage update**

Both the Centers for Medicare & Medicaid Services and evidence-based guidelines from MCG Health designate total knee replacement and total hip replacement procedures as outpatient, when medically appropriate.

As a result, we will begin to deny coverage for some total knee replacement and total hip replacement procedures when requested inpatient level of care instead of the outpatient level of care. This change will happen on November 6, 2020, for customers with fully insured plans and on January 1, 2021, for customers with self-funded plans.

Both the Centers for Medicare & Medicaid Services and evidence-based guidelines from MCG Health designate total knee replacement and total hip replacement procedures as outpatient, when medically appropriate. As a result, we will begin to deny coverage for some total knee replacement and total hip replacement procedures when requested inpatient level of care instead of the outpatient level of care. This change will happen on November 6, 2020, for customers with fully insured plans and on January 1, 2021, for customers with self-funded plans.

eviCore healthcare will continue to manage the medical necessity of both procedures and will also now manage coverage for the level of care

using evidence-based guidelines for medical necessity from MCG Health. Denials will be based on medical necessity and will include medical necessity appeal rights.

If you have any questions, please call Cigna Customer Service at 800.88Cigna (882.4462).

Thank you for the care you provide our customers.

Sincerely,

Julie B. Kessel, MD  
Medical Officer for Coverage Policy  
Clinical Performance & Quality Organization

**At a glance**

- We will begin to deny coverage for some total knee replacement and total hip replacement procedures at the inpatient level of care.
- This change will happen on November 6, 2020, for customers with fully insured plans and on January 1, 2021, for customers with self-funded plans.
- eviCore healthcare will continue to manage medical necessity for the procedure and will also manage the level of care.

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