

Outpatient Surgical Site of Service

Effective 5/11/2026

Commercial Fully Insured Groups Only

Effective 5/11/2026, The Plan will review medical necessity of a **hospital outpatient site of service (place of service 22)** for the following procedures:

- Knee Arthroscopy and Open Procedures
- Shoulder Arthroscopy and Open Procedures
- Small Joint Surgery

Note: a complete list of applicable CPT codes is included in the [Appendix](#) below.

There are no changes to the existing prior authorization requirements for these services. Prior authorization and medical necessity review will still be required for the procedure itself, with the addition of medical necessity review for any planned outpatient sites of service. If medical policy criteria are not met for the outpatient site of service, the service must be performed at an ambulatory surgery center (ASC) for coverage.

Providers who do not have a geographically accessible ASC available to them or who do not have privileges at a geographically accessible ASC must either:

- Have a signed attestation on file with The Plan (found [here](#)); or
- If no attestation has been completed, please indicate on the prior authorization request that no ASC is available to prevent delay of prior authorization review.
 - The Plan asks that the providers anticipating future site of service auth requests please submit a prospective attestation now to facilitate any [new](#) reviews.

Additionally, The Plan encourages providers to use the Care Advance Provider Portal to complete the medical necessity questionnaires associated with these procedures, as doing so streamlines the process and may allow for automatic authorization when medical policy criteria are met.

This policy does not apply to Providence Medicare and Providence OHP members. Additionally, these changes do not supersede benefit determinations of coverage.

A copy of the medical policy is available upon request and/or questions may be sent to the Medical Policy Team at: PHPMedicalPolicyInquiry@providence.org

APPENDIX

- Please make it clear on the PA request if any of the procedures listed below will be performed in a hospital outpatient setting (place of service 22).
- If necessary, please attest on the PA submission that no ASC is available to prevent delay of the prior authorization review.
 - Providers anticipating future site of service auth requests are encouraged to file a prospective attestation now to facilitate new reviews.

CODES		
Prior Authorization Required		
Knee Arthroscopy and Open Procedures		
CPT	27422	Reconstruction of dislocating patella; with extensor realignment and/or muscle advancement or release (eg, Campbell, Goldwaite type procedure)
	27427	Ligamentous reconstruction (augmentation), knee; extra-articular
	27428	Ligamentous reconstruction (augmentation), knee; intra-articular (open)
	29871	Arthroscopy, knee, surgical; for infection, lavage and drainage
	29873	Arthroscopy, knee, surgical; with lateral release
	29874	Arthroscopy, knee, surgical; for removal of loose body or foreign body (eg, osteochondritis dissecans fragmentation, chondral fragmentation)
	29875	Arthroscopy, knee, surgical; synovectomy, limited (eg, plica or shelf resection) (separate procedure)
	29876	Arthroscopy, knee, surgical; synovectomy, major, 2 or more compartments (eg, medial or lateral)
	29879	Arthroscopy, knee, surgical; abrasion arthroplasty (includes chondroplasty where necessary) or multiple drilling or microfracture
	29880	Arthroscopy, knee, surgical; with meniscectomy (medial AND lateral, including any meniscal shaving) including debridement/shaving of articular cartilage (chondroplasty), same or separate compartment(s), when performed
	29881	Arthroscopy, knee, surgical; with meniscectomy (medial OR lateral, including any meniscal shaving) including debridement/shaving of articular cartilage (chondroplasty), same or separate compartment(s), when performed
	29882	Arthroscopy, knee, surgical; with meniscus repair (medial OR lateral)
	29884	Arthroscopy, knee, surgical; with lysis of adhesions, with or without manipulation (separate procedure)
	29888	Arthroscopically aided anterior cruciate ligament repair/augmentation or reconstruction
	29889	Arthroscopically aided posterior cruciate ligament repair/augmentation or reconstruction
Shoulder Arthroscopy and Open Procedures		
CPT	23410	Repair of ruptured musculotendinous cuff (eg, rotator cuff) open; acute
	23412	Repair of ruptured musculotendinous cuff (eg, rotator cuff) open; chronic
	23420	Reconstruction of complete shoulder (rotator) cuff avulsion, chronic (includes acromioplasty)
	23430	Tenodesis of long tendon of biceps
	29806	Arthroscopy, Shoulder, Surgical; Capsulorrhaphy
	29807	Arthroscopy, Shoulder, Surgical; Repair of Slap Lesion
	29822	Arthroscopy, shoulder, surgical; debridement, limited, 1 or 2 discrete structures (eg, humeral bone, humeral articular cartilage, glenoid bone, glenoid articular cartilage, biceps tendon, biceps anchor complex, labrum, articular capsule, articular side of the rotator cuff, bursal side of the rotator cuff, subacromial bursa, foreign body[ies])

	29823	Arthroscopy, shoulder, surgical; debridement, extensive, 3 or more discrete structures (eg, humeral bone, humeral articular cartilage, glenoid bone, glenoid articular cartilage, biceps tendon, biceps anchor complex, labrum, articular capsule, articular side of the rotator cuff, bursal side of the rotator cuff, subacromial bursa, foreign body[ies])
	29824	Arthroscopy, shoulder, surgical; distal claviclectomy including distal articular surface (Mumford procedure)
	29825	Arthroscopy, shoulder, surgical; with lysis and resection of adhesions, with or without manipulation
	29827	Arthroscopy, Shoulder, Surgical; with Rotator Cuff Repair
	29828	Arthroscopy, shoulder, surgical; biceps tenodesis
Small Joint Surgery		
CPT	27702	Arthroplasty, ankle; with implant (total ankle)
	27703	Arthroplasty, ankle; revision, total ankle
	27870	Arthrodesis, ankle, open
	28110	Osteotomy, partial excision, fifth metatarsal head (bunionette) (separate procedure)
	28285	Correction, hammertoe (eg, interphalangeal fusion, partial or total phalangectomy)
	28289	Hallux rigidus correction with cheilectomy, debridement and capsular release of the first metatarsophalangeal joint; without implant
	28291	Hallux rigidus correction with cheilectomy, debridement and capsular release of the first metatarsophalangeal joint; with implant
	28292	Correction, hallux valgus with bunionectomy, with sesamoidectomy when performed; with resection of proximal phalanx base, when performed, any method
	28295	Correction, hallux valgus with bunionectomy, with sesamoidectomy when performed; with proximal metatarsal osteotomy, any method
	28296	Correction, hallux valgus with bunionectomy, with sesamoidectomy when performed; with distal metatarsal osteotomy, any method
	28297	Correction, hallux valgus with bunionectomy, with sesamoidectomy when performed; with first metatarsal and medial cuneiform joint arthrodesis, any method
	28299	Correction, hallux valgus with bunionectomy, with sesamoidectomy when performed; with double osteotomy, any method
	28306	Osteotomy, with or without lengthening, shortening or angular correction, metatarsal; first metatarsal
	28308	Osteotomy, with or without lengthening, shortening or angular correction, metatarsal; other than first metatarsal, eac
	28315	Sesamoidectomy, first toe (separate procedure)
	28750	Arthrodesis, great toe; metatarsophalangeal joint