



Rule Category:
Medical

Ref: No:
2019-MN-34

Version Control:
Version No. 1.0

Effective Date:
29-06-2019

Last Update:
10-01-2023



Meniscus Tear Management

Adjudication Guideline

Table of content

Abstract Page 1	Scope Page 2	Adjudication Policy Page 2	Appendices Page 3
---------------------------	------------------------	--------------------------------------	-----------------------------

Abstract

For Members

The meniscus is a piece of cartilage that provides a cushion between your femur (thighbone) and tibia (shinbone). There are two menisci in each knee. They can be damaged or torn during activities that put pressure on or rotate the knee joint.

For Medical Professionals

Acute meniscal tears occur most often from twisting injuries; chronic degenerative tears occur in older patients and can occur with minimal twisting or stress. Tears are classified as partial or complex; anterior, lateral, or posterior; traumatic or degenerative; and horizontal, vertical, radial, "parrot-beak," or "bucket handle."

Approved by:
Daman

Responsible:
Medical Standards & Research

Related Adjudication Guidelines:
NA

Disclaimer

By accessing these Daman Adjudication Guidelines, you acknowledge that you have read and understood the terms of use set out in the disclaimer below:

The information contained in this Adjudication Guideline is intended to outline the procedures of adjudication of medical claims as applied by the National Health Insurance Company – Daman PJSC (hereinafter "Daman"). The Adjudication Guideline is not intended to be comprehensive, should not be used as treatment guidelines and should only be used for the purpose of reference or guidance for adjudication procedures and shall not be construed as conclusive. Daman in no way interferes with the treatment of patient and will not bear any responsibility for treatment decisions interpreted through Daman Adjudication Guideline. Treatment of patient is and remains at all times the sole responsibility of the treating Healthcare Provider. This Adjudication Guideline does not grant any rights or impose obligations on Daman. The Adjudication Guideline and all of the information it contains are provided "as is" without warranties of any kind, whether express or implied which are hereby expressly disclaimed.

Under no circumstances will Daman be liable to any person or business entity for any direct, indirect, special, incidental, consequential, or other damages arising out of any use of, access to, or inability to use or access to, or reliance on this Adjudication Guideline including but without limitation to, any loss of profits, business interruption, or loss of programs or information, even if Daman has been specifically advised of the possibility of such damages. Daman also disclaims all liability for any material contained in other websites linked to Daman website.

This Adjudication Guideline is subject to the laws, decrees, circulars and regulations of Abu Dhabi and UAE. Any information provided herein is general and is not intended to replace or supersede any laws or regulations related to the Adjudication Guideline as enforced in the UAE issued by any governmental entity or regulatory authority, or any other written document governing the relationship between Daman and its contracting parties.

This Adjudication Guideline is developed by Daman and is the property of Daman and may not be copied, reproduced, distributed or displayed by any third party without Daman's express written consent. This Adjudication Guideline incorporates the Current Procedural Terminology (CPT®), which is a registered trademark of the American Medical Association ("AMA") and the CPT codes and descriptions belong to the AMA. Daman reserves the right to modify, alter, amend or obsolete the Adjudication Guideline at any time by providing one month prior notice.

Scope

This guideline specifies the coverage details for the management of meniscus tears for all the health insurance plans administered by Daman.

1. Types of tears:
 - a) Acute tears occur most frequently as a result of a twisting injury to the knee when the foot is planted more commonly in athletes.
 - b) Chronic degenerative tears are more gradual and more common in elderly people.
2. Imaging:
 - a) MRI – gold standard.
 - b) Plain radiographs

3. Management:

Treatment options for meniscal tears are either operative or non-operative. The management of meniscal tears depends upon the type of tear (e.g. intra-substance, horizontal, or vertical), the presence of significant mechanical symptoms, and the presence of persistent knee effusions.

Small intra-substance and vertical tears that cause infrequent symptoms and do not interfere with general knee function can be managed medically with pain medication, rest, activity restriction, and physical therapy. Clinicians should try to exhaust conservative management options before referring such patients for surgery.

Surgical options include partial or total meniscectomy and repair of the meniscal tear. Open or arthroscopic surgery can be performed.

Adjudication Policy

Eligibility / Coverage Criteria

- I. Surgical management may be considered medically necessary for acute meniscal tear when ALL of the following 3 criteria are met:
 1. Clinical documentation confirms the presence of a meniscus tear, **AND**
 2. Diagnostic imaging (MRI) demonstrates a torn or displaced meniscus, **AND**
 3. One of the following:
 - a) Justification for immediate surgery, **OR**
 - b) 6 weeks of conservative care has been tried and failed (e.g., Physiotherapy, activity modification and oral analgesics)

- II. Degenerative tears

Current evidence suggests that meniscectomy has no added benefit compared with non-surgical management in non-obstructive degenerative meniscal disease. In patients 50 years and older and imaging shows the presence of severe arthritis (i.e. large osteophytes, marked narrowing of joint space, severe sclerosis and definite deformity of bone contour).

Surgical management may be considered medically necessary if 12 months of conservative care has been tried and failed (e.g. physiotherapy, activity modification and oral analgesics). If the clinician thinks otherwise, they should provide all the justification for immediate surgery.

Non-Coverage

- Daman does not cover any treatment of meniscus tears for the Visitors Plan.
- Daman does not cover any treatment of meniscus tears if the patient failed to meet the criteria mentioned above.
- Provider must submit all the information included in the questionnaire to avoid any rejection due to incomplete documentation.

Payment and Coding Rules

Please apply DOH/DHA payment rules and regulations, as well as relevant coding manuals for ICD, CPT, etc. ICD and CPT codes must be coded to the highest level of specificity.

Questionnaire:

<https://www.damaninsurance.ae/main/pdf/support/Questionnaire/SurgicalmanagementofmeniscustearsQuestionnaire.pdf>

Appendices

A. References

- <http://www.dynamed.com/topics/dmp~AN~T116776/Meniscus-tears#Testing-overview>
- https://www.uptodate.com/contents/meniscal-injury-of-the-knee?search=meniscus%20tear&source=search_result&selectedTitle=1~55&usage_type=default&display_rank=1
- <https://emedicine.medscape.com/article/90661-overview>
- <https://orthoinfo.aaos.org/en/diseases--conditions/meniscus-tears>

B. Revision History

Date	Change(s)
30/05/2019	Release of V1.0
10-01-2023	Questionnaire link update