

02-20000-38

Original Effective Date: 01/15/10

Reviewed: 06/26/25

Revised: 07/15/25

Subject: Thumb Basal Joint Arthroscopy

THIS MEDICAL COVERAGE GUIDELINE IS NOT AN AUTHORIZATION, CERTIFICATION, EXPLANATION OF BENEFITS, OR A GUARANTEE OF PAYMENT, NOR DOES IT SUBSTITUTE FOR OR CONSTITUTE MEDICAL ADVICE. ALL MEDICAL DECISIONS ARE SOLELY THE RESPONSIBILITY OF THE PATIENT AND PHYSICIAN. BENEFITS ARE DETERMINED BY THE GROUP CONTRACT, MEMBER BENEFIT BOOKLET, AND/OR INDIVIDUAL SUBSCRIBER CERTIFICATE IN EFFECT AT THE TIME SERVICES WERE RENDERED. THIS MEDICAL COVERAGE GUIDELINE APPLIES TO ALL LINES OF BUSINESS UNLESS OTHERWISE NOTED IN THE PROGRAM EXCEPTIONS SECTION.

[Position
Statement](#)

[Billing/Coding](#)

[Reimbursement](#)

[Program
Exceptions](#)

[Definitions](#)

[Related
Guidelines](#)

[Other](#)

[References](#)

[Update](#)

DESCRIPTION:

The basal joint complex of the thumb provides the framework necessary for function of the human hand. Painful instability of this joint can stem from several causes including traumatic dislocation, various hypermobility conditions, and chronic overuse and microtrauma.

Thumb basal joint arthroscopy is proposed as a first step in the treatment and staging of arthritis of the basal joint, from which a determination could be made for the need of other surgical or non-surgical procedures. The following procedures may be recommended based on the arthroscopic findings: arthroscopic debridement, chondroplasty, synovectomy, tendon interposition, ligament reconstruction, fusion, osteotomy, thermal capsulorrhaphy or total joint arthroplasty,

POSITION STATEMENT:

The use of thumb basal joint arthroscopy in the diagnosis and/or staging of thumb basal joint arthritis is considered **experimental or investigational**, as there is insufficient clinical evidence in the published peer-reviewed medical literature to support its effectiveness.

BILLING/CODING INFORMATION:

There is no specific CPT or HCPCS code to report thumb basal joint arthroscopy.

REIMBURSEMENT INFORMATION:

Refer to section entitled [POSITION STATEMENT](#).

PROGRAM EXCEPTIONS:

Federal Employee Program (FEP): Follow FEP guidelines.

State Account Organization (SAO): Follow SAO guidelines.

Medicare Advantage products: No National Coverage Determination (NCD) and/or Local Coverage Determination (LCD) was found at the time of the last guideline reviewed date.

If this Medical Coverage Guideline contains a step therapy requirement, in compliance with Florida law 627.42393, members or providers may request a step therapy protocol exemption to this requirement if based on medical necessity. The process for requesting a protocol exemption can be found at [Coverage Protocol Exemption Request](#)

DEFINITIONS:

No guideline specific definitions apply.

RELATED GUIDELINES:

None.

OTHER:

None applicable.

REFERENCES:

1. AHRQ National Guideline Clearinghouse. Guideline Summary NCG-6557. Forearm, wrist and hand (acute and chronic), not including carpal tunnel syndrome (2004). Last revised 05/29/08.
2. AHRQ National Guideline Clearinghouse. Guideline Summary NCG-8311. Forearm, wrist and hand (acute and chronic), not including carpal tunnel syndrome (2011). Last revised 05/25/11.
3. American Academy of Orthopaedic Surgeons. Arthritis of the Thumb. Last reviewed and updated July 2007. ©2007.
4. American Academy of Orthopaedic Surgeons. Arthroscopy. Last reviewed and updated May 2010. ©2010.
5. American Society for Surgery of the Hand. Arthritis: Base of the Thumb (2009). ©2010 American Society for Surgery of the Hand.
6. American Society for Surgery of the Hand. 63rd Annual Meeting, Symposium 12: Basal Joint Arthritis: Tried and True and What's New. September 20, 2008.
7. Badia A. Arthroscopic Indications and Technique for Artelon Interposition Arthroplasty of the Thumb Trapeziometacarpal Joint. Techniques in Hand & Upper Extremity Surgery 2008; 12(4): pp 00–00.
8. Badia A. Arthroscopy of the Trapeziometacarpal and Metacarpophalangeal Joints. The Journal of Hand Surgery 2007; pp 1.
9. Badia A. Trapeziometacarpal Arthroscopy: A Classification and Treatment Algorithm. Hand Clinics 2006; 22: pp 153–163.
10. Badia et al. Treatment of Early Basal Joint Arthritis Using a Combined Arthroscopic Debridement and Metacarpal Osteotomy. Techniques in Hand and Upper Extremity Surgery 2007; 11(2): pp 1Y6.

11. Batra S, Kanvinde R. Osteoarthritis of the thumb trapeziometacarpal joint. *Current Orthopaedics* (2007) 21, 135–144.
12. Bernstein RA. Arthritis of the thumb and digits: current concepts. *Instr Course Lect.* 2015; 64:281-94. PMID: 25745914.
13. Carro et al. Innovations in Arthroscopic Management of Basal Joint Arthritis of the Thumb. *The Journal of Arthroscopic and Related Surgery* 2006; 22(12): pp 1361.e1-1361.e4.
14. ClinicalTrials.gov. Basal Joint Arthritis Prospective (BJAM). NCT01376024. Arthritis Foundation American Society for Surgery of the Hand. Verified in June 2011 by Columbia University.
15. Croog AS, Rettig ME. Newest Advances in the Operative Treatment of Basal Joint Arthritis. *Bulletin of the NYU Hospital for Joint Diseases* 2007;65(1):78-86.
16. Farino GC, Goitz RJ. Thumb trapeziometacarpal joint arthritis: is there a role for arthroscopy? *Orthop* 2002, 13:256–259 ©2002 Lippincott Williams & Wilkins, Inc.
17. Mane SA, Bansode AS, Karande CS, Wahegaonkar AL. Arthroscopic Excision of Localized Nodular Tenosynovitis of Carpometacarpal Joint of Thumb: A Case Report and Review of Literature. *J Wrist Surg.* 2021 Mar 9;10(6):533-535. doi: 10.1055/s-0041-1725963.
18. National Institutes of Health Publication No. 10-4617. National Institute of Arthritis and Musculoskeletal and Skin Diseases: Osteoarthritis (July 2010).
19. Pegoli et al. Arthroscopic evaluation and treatment by tendon Interpositional Arthroplasty of first carpometacarpal joint arthritis. *Hand Surgery* 2007; 12(1): pp 35–39.
20. Rabinovich RV, Polatsch DB, Shin SS, Beldner S. Thumb Carpometacarpal Instability. *J Am Acad Orthop Surg.* 2021 Nov 15;29(22):943-950. doi: 10.5435/JAAOS-D-21-00310. PMID: 34271570.
21. Rahman AM, Green SM. Basal Joint Arthritis A Review of Pathology, History, and Treatment. *Bull Hosp Jt Dis* (2013). 2019 Mar;77(1):57-63. PMID: 30865866.
22. Schröder J, Kerkhoffs GMMJ, Voerman HJ, Marti RK. Surgical treatment of basal joint disease of the thumb: comparison between resection-interposition arthroplasty and trapezio-metacarpal arthrodesis. *Arch Orthop Trauma Surg* (2002) 122 :35–38.
23. Sulje Z, Starčević D, Aljinović A, Barbarić Starčević K. Surgical Methods in the Treatment of Basal Thumb Arthritis - From Arthroscopy To Arthroplasty. *Acta Clin Croat.* 2024 Oct;63(2):393-402. doi: 10.20471/acc.2024.63.02.16.
24. UpToDate. Clinical manifestations and diagnosis of osteoarthritis. 2025. Accessed at uptodate.com.
25. UpToDate. Evaluation of the patient with thumb pain. 2025. Accessed at uptodate.com.
26. Watt AJ, Shin AY, Vedder NB, Chang J. Joint Arthritis and Soft-Tissue Problems of the Hand. *Plastic and Reconstructive Surgery.* December 2010.
27. Wong CW, Ho PC. Arthroscopic Management of Thumb Carpometacarpal Joint Arthritis. *Hand Clin.* 2017 Nov;33(4):795-812. doi: 10.1016/j.hcl.2017.07.007. PMID: 28991590.

COMMITTEE APPROVAL:

This Medical Coverage Guideline (MCG) was approved by the Florida Blue Medical Policy and Coverage Committee on 06/26/25.

GUIDELINE UPDATE INFORMATION:

01/15/10	New Medical Coverage Guideline.
02/15/11	Scheduled review; position statement unchanged. Updated references.

02/15/12	Scheduled review; position statement unchanged. Updated description section and references.
05/11/14	Revision: Program Exceptions section updated.
09/15/19	Scheduled review. Maintained position statement. Revised description and updated references.
03/15/21	Scheduled review. Maintained position statement and updated references.
10/15/22	Scheduled review. Revised description; maintained position statement, and updated references.
05/23/23	Update to Program Exceptions section.
01/01/24	Position statements maintained.
07/15/25	Scheduled review. Maintained position statement and updated references.