# **Medical Coverage Policy** | Intra-Articular Hyaluronan Injections for Osteoarthritis, effective 1/1/2016

EFFECTIVE DATE: 01|01|2016 POLICY LAST UPDATED: 02|01|2016



### OVERVIEW

Knee osteoarthritis (OA) is common, costly, and a cause of substantial disability. Among U.S. adults, the most common causes of disability are arthritis and rheumatic disorders. Currently, no curative therapy is available for OA, and thus the overall goals of management are to reduce pain, disability, and the need for knee replacement surgery. Intra-articular injection of hyaluronan (IAHA) into osteoarthritic joints is thought to replace endogenous hyaluronan, restore the viscoelastic properties of the synovial fluid, and improve pain and function.

### MEDICAL CRITERIA

BlueCHiP for Medicare and Commercial Products Not applicable

#### PRIOR AUTHORIZATION

Not applicable

# POLICY STATEMENT

# BlueCHiP for Medicare

Intra-articular hyaluronan injections of the knee or shoulder joint are considered medically necessary when billed with one of the ICD-10 codes listed below.

### **Commercial Products**

Intra-articular hyaluronan injections of the knee and all other joints are considered not medically necessary as there is insufficient peer-reviewed scientific literature that demonstrates that the procedure/service is effective.

### Individual Consideration

All of our medical policies are written for the majority of people with a given condition. Each policy is based on medical science. For many of our medical policies, each individual's unique clinical circumstances may be considered in light of current scientific literature. Physicians may send relevant clinical information for individual patients for consideration to:

> Individual Consideration Unit of Basic Claims Administration Blue Cross & Blue Shield of Rhode Island 500 Exchange Street Providence, RI 02903-2699

#### COVERAGE

Benefits may vary between groups and contracts. Please refer to the appropriate Benefit Booklet, Evidence of Coverage, or Subscriber Agreement for applicable limitations of benefits/coverage when services are not medically necessary.

### BACKGROUND

Knee OA is common, costly, and a cause of substantial disability. Among U.S. adults, the most common causes of disability are arthritis and rheumatic disorders. Currently, no curative therapy is available for OA, and thus the overall goals of management are to reduce pain, disability, and the need for surgery. IAHA has

been proposed as a means of restoring the normal viscoelasticity of the synovial fluid in patients with OA and improving pain and function. This treatment may also be called viscosupplementation. Hyaluronan (HA) is a naturally occurring macromolecule that is a major component of synovial fluid and is thought to contribute to its viscoelastic properties. Chemical crosslinking of HA increases its molecular weight; cross-linked hyaluronans are referred to as hylans. In OA, the overall length of HA chains present in cartilage and the HA concentration in the synovial fluid are decreased.

Intra-articular injection of hyaluronan into osteoarthritic joints is thought to replace hyaluronan, restore the viscoelastic properties of the synovial fluid, and improve pain and function. The largest amount of evidence is on treatment of OA of the knee. Individual trials show inconsistent results in pain and functional outcomes for IAHA compared with placebo or active control. Meta-analyses of randomized controlled trials (RCTs) show improvements in pain and function that are statistically significant, but have not been demonstrated to be clinically significant in an appreciable number of patients

### CODING

# BlueCHiP for Medicare

The following HCPCS codes are medically necessary when billed with one of the ICD-10 codes listed below:

J7320 Hyaluronan or derivitive, genvisc 850, for intra-articular injection, 1 mg (effective 1/1/2017)

J7322 Hyaluronan or derivative, hymovis, for intra-articular injection, 1 mg (effective 1/1/2017)

J7321 Hyaluronan or derivative, Hyalgan or Supartz, for intra-articular injection, per dose

J7323 Hyaluronan or derivative, Euflexxa, for intra-articular injection, per dose

J7324 Hyaluronan or derivative, Orthovisc, for intra-articular injection, per dose

J7325 Hyaluronan or derivative, Synvisc or Synvisc-One, for intra-articular injection, 1 mg

J7326 Hyaluronan or derivative, Gel-One, for intra-articular injection, per dose

J7327 Hyaluronan or derivative, Monovisc, for intra-articular injection, per dose

J7328 Hyaluronan or derivative, gel-syn, for intra-articular injection, 0.1 mg

Q9980 Hyaluronan or derivative, genvisc 850, for intra-articular injection, 1 mg (Delete 12/31/16)

The following HCPCS code is medically necessary when billed with one of the ICD-10 codes listed below: C9471 Hyaloronan or derivative, Hymovis, for intra-articular injection, 1 mg (code effective date 4/1/2016, follow unlisted process)

ICD-10 BlueCHiP for Medicare: M17.0, M17.11, M17.12, M17.2, M17.31, M17.32, M17.4, M17.5, M17.9, M19.011, M19.012, M19.111, M19.211, M19.212

The following CPT codes are medically necessary for BlueCHiP for Medicare when used with one of the HCPCS codes listed above: 20610

20611

# **Commercial Products**

The following HCPCS codes are not medically necessary

J7321 Hyaluronan or derivative, Hyalgan or Supartz, for intra-articular injection, per dose

J7323 Hyaluronan or derivative, Euflexxa, for intra-articular injection, per dose

J7324 Hyaluronan or derivative, Orthovisc, for intra-articular injection, per dose

J7325 Hyaluronan or derivative, Synvisc or Synvisc-One, for intra-articular injection, 1 mg

J7326 Hyaluronan or derivative, Gel-One, for intra-articular injection, per dose

J7327 Hyaluronan or derivative, Monovisc, for intra-articular injection, per dose

J7328 Hyaluronan or derivative, Gel-syn, for intra-articular injection, 0.1 mg

Q998 Hyaluronan or derivative, Genvisc 850, for intra-articular injection, 1 mg

The following CPT codes are not medically necessary when used with one of the HCPCS codes listed above: 20610 20611

**RELATED POLICIES** 

None

### **PUBLI SHED**

Provider Update, March 2016 Provider Update, November 2015

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