Health Technology Clinical Committee
Findings and Decision

Topic: Femoroacetabular Impingement Syndrome – Re-review
Meeting Date: November 22, 2019
Final Adoption: January 17, 2020

Meeting materials and transcript are available on the HTA website.

Number and coverage topic:
20191122B – Hip surgery for femoroacetabular impingement syndrome – re-review

HTCC coverage determination:
Hip surgery for femoroacetabular impingement syndrome is not a covered benefit.

HTCC reimbursement determination:
Limitations of coverage:
N/A
Non-covered indicators:
Hip surgery for femoroacetabular impingement syndrome.

Agency contact information:

<table>
<thead>
<tr>
<th>Agency</th>
<th>Phone Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>Labor and Industries</td>
<td>1-800-547-8367</td>
</tr>
<tr>
<td>Public Employees Health Plan</td>
<td>1-800-200-1004</td>
</tr>
<tr>
<td>Washington State Medicaid</td>
<td>1-800-562-3022</td>
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HTCC coverage vote and formal action:

**Committee decision**

Based on the deliberations of key health outcomes, the committee decided that it had the most complete information: a comprehensive and current evidence report, public comments and state agency utilization information. The committee decided that the current evidence on hip surgery for femoroacetabular impingement syndrome (FAI) is sufficient to make a determination on this topic. The committee discussed and voted on the evidence for the use of FAI. The committee considered the evidence and gave greatest weight to the evidence it determined, based on objective factors, to be the most valid and reliable.

Based on these findings, the committee voted to not cover hip surgery for FAI.

<table>
<thead>
<tr>
<th></th>
<th>Not covered</th>
<th>Covered under certain conditions</th>
<th>Covered unconditionally</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hip surgery for femoroacetabular impingement syndrome</td>
<td>8</td>
<td>2</td>
<td>0</td>
</tr>
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</table>

**Discussion**

The committee reviewed and discussed the available studies for use of hip surgery for FAI. The discussion focused on studies available since the original review in 2011. Details of study design, inclusion criteria, outcomes and other factors affecting study quality were discussed. A clinical expert member provided detailed insight and discussion points. A majority of committee members found the evidence sufficient to determine that use of hip surgery for FAI was less safe or unproven for safety and less cost-effective or unproven for cost-effectiveness. The committee prospective on the efficacy of hip surgery for FAI was evenly divided between unproven and more effective in some cases.

**Limitations**

N/A

**Action**

The committee checked for availability of a Centers for Medicare and Medicaid Services (CMS) national coverage decision (NCD). There is no Medicare national or local coverage determination for surgical treatment of FAI.

No new evidence-based clinical guidelines were identified for this review. The original review included a guideline from the National Institutes for Health and Clinical Excellence (NICE) for arthroscopic and open hip surgery. This guideline had not been updated since the original review (2011). The committee discussed two identified expert consensus documents (not formal guidelines) for FAI from the following organizations:

- The Warwick Agreement
- Lynch systematic review, 2019

**Final**

Hip surgery for femoroacetabular impingement syndrome – re-review: findings and decision
There are no current or new guidelines for the HTCC to compare for consistency with their determination.

The committee chair directed HTA staff to prepare a findings and decision document on hip surgery for FAI for public comment, to be followed by consideration for final approval at the next public meeting.

**Health Technology Clinical Committee Authority:**

Washington State’s legislature believes it is important to use a science-based, clinician-centered approach for difficult and important health care benefit decisions. Pursuant to chapter 70.14 RCW, the legislature has directed the Washington State Health Care Authority (HCA), through its Health Technology Assessment (HTA) program, to engage in an evaluation process that gathers and assesses the quality of the latest medical evidence using a scientific research company and that takes public input at all stages.

Pursuant to RCW 70.14.110 a Health Technology Clinical Committee (HTCC) composed of eleven independent health care professionals reviews all the information and renders a decision at an open public meeting. The Washington State HTCC determines how selected health technologies are covered by several state agencies (RCW 70.14.080-140). These technologies may include medical or surgical devices and procedures, medical equipment, and diagnostic tests. HTCC bases its decisions on evidence of the technology’s safety, efficacy, and cost effectiveness. Participating state agencies are required to comply with the decisions of the HTCC. HTCC decisions may be re-reviewed at the determination of the HCA Director.