

Health Technology Clinical Committee Final Findings and Decision

Topic:Functional Neuroimaging for Primary Degenerative Dementia or Mild Cognitive<br/>ImpairmentMeeting Date:January 16, 2015Final Adoption:March 20, 2015

Meeting materials and transcript are available on the HTA website: www.hca.wa.gov/hta/meetingmaterials/Forms/ExtMeetingMaterials.aspx

## Number and Coverage Topic:

20150116A – Functional Neuroimaging for Primary Degenerative Dementia or Mild Cognitive Impairment\*

### **HTCC Coverage Determination:**

Functional neuroimaging for primary degenerative dementia or mild cognitive impairment is **not covered**.

## **HTCC Reimbursement Determination:**

### Limitations of Coverage: N/A

### Non-covered Indicators:

*Functional* imaging technologies including: fludeoxyglucose (FDG) Positron Emission Tomography (PET), (11)C-dihydrotetrabenazine (C-DTBZ) PET, Single Photon Emission Computed Tomography (SPECT), Functional Magnetic Resonance Imaging (fMRI) for the diagnosis of primary degenerative dementia or mild cognitive impairment.

\* Beta-amyloid PET imaging is outside the scope of this coverage determination.

### **Agency Contact Information:**

Agency	Phone Number	
Labor and Industries	1-800-547-8367	
Public Employees Health Plan	1-800-200-1004	
Washington State Medicaid	1-800-562-3022	

## 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 concluded that the current evidence on Positron Emission Tomography (PET), Single Photon Emission Computed Tomography (SPECT), Functional Magnetic Resonance Imaging (fMRI) or Arterial Spin Labeling (ASL) demonstrates that there is sufficient evidence to not cover.

The committee considered all 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 Positron Emission Tomography (PET), Single Photon Emission Computed Tomography (SPECT), Functional Magnetic Resonance Imaging (fMRI) or Arterial Spin Labeling (ASL) for functional neuroimaging for primary degenerative dementia or mild cognitive impairment.

	Not	Covered Under	Covered
	Covered	Certain Conditions	Unconditionally
Functional neuroimaging with PET, SPECT, fMRI or fMRI with ASL	10	0	0

## Discussion

The chair called for discussion of conditions and evidence related to functional neuroimaging. The committee identified potential conditions and moved to vote. The committee voted to not cover these technologies for primary degenerative dementia and mild cognitive impairment.

### Action

The committee checked for availability of Medicare national coverage decisions (NCDs). There are NCDs that include coverage for FDG-PET scanning and SPECT scanning for dementia, mild cognitive impairment and other conditions. The committee discussed the basis for these decisions and the date of evidence review supporting the decisions. The chair cited lack of evidence supporting improved outcomes with use of functional imaging tests. No NCD for fMRI was identified.

The committee discussed the availability of a number of guidelines. The committee did not identify data supporting clinical outcomes or changes in treatment or caregiver benefits to support coverage.

The committee Chair directed HTA staff to prepare a Findings and Decision document on Functional Neuroimaging for Primary Degenerative Dementia or Mild Cognitive Impairment reflective of the majority vote 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 Administrator.