


Washington State
Health Care Authority

Program updates


Josh Morse, HTA Program Director
WA – Health Care Authority
May 19, 2017



Washington State
Health Care Authority


Today's agenda

- 1) Selected treatments for varicose veins
- 2) Treatment of chronic migraine and chronic tension-type headache




2017 Committee calendar

- July 14
 - Meeting by webinar:
Final action on May 19, findings and decisions
- November 17
 - Mammogram: Computer-aided detection (CAD)
 - TBD



Update on 2016 technology selections

- ✓ Artificial disc replacement (Re-review)
- ✓ Extracorporeal shock wave therapy for musculoskeletal conditions
- ✓ Interventions for treatment of migraines/ headaches
- ✓ Varicose veins
- ~~✓ Skin substitutes~~
- ✓ Computer-aided detection mammography




Update on 2017 technology selections

Proposed for initial assessment:

1. Surgical interventions for unilateral, single-level nerve root compression with radiculopathy
2. Extremity ultrasound
3. Genomic micro-array and whole exome sequencing
4. Genetic testing or molecular pathology testing of cancers
5. Pharmacogenomic testing: Selected conditions

Proposed for re-review:

1. Continuous glucose monitoring



Questions?

More Information:
shtap@hca.wa.gov

Health Technology Clinical Committee

Date: March 17, 2017

Time: 8:00 am – 1:30 pm

Location: SeaTac Conference Center, SeaTac, WA

Adopted:

Meeting materials and transcript are available on the HTA website at:
www.hca.wa.gov/about-hca/health-technology-assessment/meetings-and-materials

Draft HTCC Minutes

Members present: John Bramhall, MD, PhD; Gregory Brown, MD, PhD; Joann Elmore, MD, MPH; Chris Hearne, RN, DNP, MPH; Carson Odegard, DC, MPH; Christopher Standaert, MD; Kevin Walsh, MD; Tony Yen, MD

Clinical expert: Michael Chang, MD, PhD

HTCC Formal Action

- 1. Call to order:** Dr. Standaert, chair, called the meeting to order; members present constituted a quorum.
- 2. HTA program updates:** Josh Morse, program director, presented upcoming topics for committee meetings.
- 3. January 20, 2017 meeting minutes:** Draft minutes reviewed; no changes or updates suggested. Motion made to approve January 20, 2017 minutes as written, seconded. Committee voted to accept the minutes.
Action: Eight committee members approved the January 20, 2017 meeting minutes.
- 4. Pharmacogenomic testing – Draft findings and decision:** Chair referred members to the draft findings and decision and called for further discussion. Two comments were received on the draft decision. The committee reviewed and discussed the comments.
Action: Eight committee members voted to approve the pharmacogenomic testing findings.
- 5. Artificial discs - Draft findings and decision:** Chair referred members to the draft findings and decision and called for further discussion. Three comments were received on the draft decision. The committee reviewed and discussed the comments. One comment suggested a change to the last paragraph, first line. The committee reviewed and agreed with the suggested change, and, as amended it reads: "Patients must have advanced imaging ~~or~~ and clinical evidence of corresponding nerve root...".
Action: Eight committee members voted to approve the artificial disc findings and decision.

Draft

6. Extracorporeal shock wave therapy (ESWT) for musculoskeletal conditions:

The chair introduced Michael Chang, MD, PhD, Physical Medicine Institute, Bellevue, WA.

Agency utilization and outcomes: Gary Franklin, MD, MPH, Medical Director for the Washington State Department of Labor and Industries, presented the state agency perspective for extracorporeal shock wave therapy for musculoskeletal conditions. The full presentation is published with the [March 17, meeting materials](#).

Scheduled and open public comments: The chair called for public comments. There were no comments.

Vendor report / HTCC question and answer:

Andrea Skelly, PhD, MPH, Spectrum Research, Inc., presented the evidence review of extracorporeal shock wave therapy for musculoskeletal conditions. The full presentation is published with the [March 17, meeting materials](#).

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 evaluated the available evidence. The committee discussed and voted on the evidence for use of extracorporeal shock wave therapy for musculoskeletal conditions compared to current alternative strategies. A majority of committee members found the technology unproven for safety, efficacy and cost-effectiveness based on the quality of available evidence. The committee considered 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 extracorporeal shock wave therapy for musculoskeletal conditions.

	Not covered	Covered under certain conditions	Covered unconditionally
Extracorporeal shock wave therapy for musculoskeletal conditions	8	0	0

Discussion

Limitations

Not applicable.

Action

The committee checked for availability of a Medicare national coverage decision (NCD). There is no NCD for Extracorporeal shock wave therapy for musculoskeletal conditions.

The committee reviewed and discussed clinical guidelines identified for extracorporeal shock wave therapy for musculoskeletal conditions from the following organizations:

- American Academy of Family Practice
- American College of Foot and Ankle Surgeons
- American College of Occupational and Environmental Medicine (ACOEM)
- Colorado Division of Workers Compensation
- Dutch Orthopedic Association

The committee chair directed HTA staff to prepare a findings and decision document for extracorporeal shock wave therapy for musculoskeletal conditions reflective of the majority vote for public comment, followed by consideration for final approval at the next public meeting.

7. The committee reviewed and discussed possible changes to the current HTCC bylaws. The group discussed different aspects of the bylaws. Josh Morse and Dr. Standaert, will craft a draft for the committee's consideration
8. Meeting adjourned.

**Health Technology Clinical Committee
Draft Findings and Decision**

Topic: Extracorporeal shock wave therapy for musculoskeletal conditions

Meeting date: March 17, 2017

Final adoption:

Meeting materials and transcript are available on the HTA website:
www.hca.wa.gov/about-hca/health-technology-assessment/meetings-and-materials

Number and coverage topic:

20170317A – Extracorporeal shock wave therapy for musculoskeletal conditions

HTCC coverage determination:

Extracorporeal shock wave therapy for musculoskeletal conditions is **not a covered benefit**.

HTCC reimbursement determination:

Limitations of coverage: N/A

Non-covered indicators: N/A

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

Draft

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 discussed and voted on the evidence for use of extracorporeal shock wave therapy for these conditions compared to current alternative strategies. **A majority of members voted extracorporeal shock wave therapy was unproven for efficacy and cost-effectiveness.** 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 extracorporeal shock wave therapy for musculoskeletal conditions.

	Not covered	Covered under certain conditions	Covered unconditionally
Extracorporeal shock wave therapy for musculoskeletal conditions	8	0	0

Discussion

N/A

Limitations

N/A

Action

The committee checked for availability of a Medicare national coverage decision (NCD). Medicare does have a NCD for extracorporeal shock wave therapy for musculoskeletal conditions.

The committee discussed clinical guidelines identified for extracorporeal shock wave therapy. The chair noted the committee’s decision varied with many of them due to heterogeneity in the conditions addressed.

Clinical guidelines from the following organizations were reviewed:

- Occupational medicine practice guidelines (2011), American College of Occupational and Environmental Medicine (ACOEM), Ankle and Foot Disorders
- Occupational medicine practice guidelines (2012), American College of Occupational and Environmental Medicine (ACOEM), Elbow Disorders
- Knee Disorders, American College of Occupational and Environmental Medicine (ACOEM)
- Shoulder Injury Medical Treatment Guidelines (2015), Colorado Division of Workers’ Compensation
- Guideline for the Diagnosis and Treatment of Subacromial Pain Syndrome: A multidisciplinary review by the Dutch Orthopedic Association (2014), Dutch Orthopedic Association

- Common Overuse Tendon Problems: Review and Recommendation for Treatment (2005), American Academy of Family Practice
- The Diagnosis and Treatment of Heel Pain: A Clinical Practice Guideline (2010), American College of Foot and Ankle Surgeons

The committee chair directed HTA staff to prepare a findings and decision document on extracorporeal shock wave therapy for musculoskeletal conditions for public comment; 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 Administrator.

Extracorporeal shock wave therapy for musculoskeletal conditions

Draft findings and decision
Timeline, overview and comments

The Health Technology Assessment (HTA) program received comments in response to the posted Health Technology Clinical Committee (HTCC) draft findings and decision on extracorporeal shock wave therapy for musculoskeletal conditions.

Timeline

Phase	Date	Public Comment Days
Technology recommendations published	February 26, 2016	
Public comments	February 26, to March 10, 2016	14
Selected technologies published	April 18, 2016	
Public comments	April 19, to May 18, 2016	30
Draft key questions published	August 12, 2016	
Public comments	August 12, to 25, 2016	14
Final key questions published	September 20, 2016	
Draft report published	December 29, 2016	
Public comments	December 30, to January 30, 2017	32
Final report published	February 13, 2017	
Public meeting	March 17, 2017	
Draft findings & decision published	April 26, 2017	
Public comments	April 26, to May 9, 2017	14

Overview

Category	Comment Period <i>April 26, to May 9, 2017</i>	Cited Evidence
Patient, relative, and citizen	1	0
Legislator and public official	0	0
Health care professional	0	0
Industry & manufacturer	0	0
Professional society & advocacy organization	0	0
Total	1	0

Comments

	Respondents	Representing	Cited Evidence
<input type="checkbox"/>	1. Robert J. Freund		No

From: Robert Freund <ugtmail.00@gmail.com>
Sent: Wednesday, April 26, 2017 1:20 PM
To: HCA ST Health Tech Assessment Prog
Subject: ESWT

I believe that it is a good idea, especially if a wide range of insurance policies provide for its use. If it is not going to be included on medicare and state insurance policies it will benefit only those of higher income and should not be allowed. I had it available years ago when I lived in Wisconsin and it eliminated the need for continual and painful cortisone injections.

Respectfully,

Robert J Freund