



**Health Technology Clinical Committee** 

**Findings and Decision** 

Topic: Microprocessor-Controlled Lower Limb Prosthetics

Meeting Date: November 18, 2011 Final Adoption: March 16, 2012

# **Number and Coverage Topic**

20111118A - Microprocessor-Controlled Lower Limb Prosthetics

## **HTCC Coverage Determination**

Microprocessor-controlled Lower Limb Prostheses (MCP) for the Knee is a **covered benefit with conditions** 

Microprocessor-controlled Lower Limb Prostheses (MCP) for the feet and ankle is **not a covered benefit** 

## **HTCC Reimbursement Determination**

#### Limitations of Coverage

Microprocessor-controlled Lower Limb Prostheses (MCP) for the knee is a covered benefit when the following conditions are met:

- Functional levels 3 or 4, level 2 under agency review
- Experienced user, exceptions under agency review
- Use within manufacturers' specifications

#### Non-Covered Indicators

Microprocessor-controlled Lower Limb Prostheses (MCP) for the feet and ankle

## Agency Contact Information

Agency	Contact Phone Number	
Labor and Industries	1-800-547-8367	
Public Employees Health Plan	1-800-762-6004	
Health and Recovery Services Administration	1-800-562-3022	

# HTCC COVERAGE VOTE AND FORMAL ACTION

November 18th, 2011 Meeting Transcript can be found here: <a href="http://www.hta.hca.wa.gov/schedule.html">http://www.hta.hca.wa.gov/schedule.html</a>

#### **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 agency and state utilization information. The committee concluded that the current evidence on Microprocessor-controlled Prosthesis for the knee demonstrates that there is sufficient evidence to cover with conditions. The committee concluded that the current evidence on Microprocessor-controlled Prosthesis for the feet and ankle demonstrates that there is insufficient evidence to 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 Microprocessor-controlled Prosthesis for the feet and ankle.

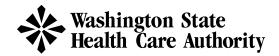
#### **Microprocessor-controlled Prostheses Coverage Vote**

Microprocessor-controlled Prostheses Coverage Vote: Based on the evidence provided and the information and comments presented, the committee moved to a vote on coverage.

HTCC COMMITTEE COVERAGE DETERMINATION VOTE			
	Not covered	Covered Unconditionally	Covered Under Certain Conditions
Microprocessor-controlled Lower Limb Prostheses			
(MCP) for the Knee	0	0	10
Microprocessor-controlled Lower Limb Prostheses (MCP) for the feet and ankle	9		

- ✓ *Discussion:* The Chair called for discussion on conditions related to MCP due to the majority voting for coverage. The following conditions were discussed and approved by a majority:
  - ➤ Limitations of Coverage: Microprocessor-controlled Lower Limb Prostheses (MCP) for the knee is a covered benefit when the following conditions are met:
    - Functional levels 3 or 4, level 2 under agency review;
    - Experienced user, exceptions under agency review; and
    - Use within manufacturers specifications
- Action: The committee Chair directed HTA staff to prepare a Findings and Decision document on Microprocessor-controlled Prostheses reflective of the majority vote for final approval at the next public meeting.

The committee reviewed the Clinical guidelines and Medicare decision. The Centers for Medicare and Medicaid Services have no published national coverage determinations (NCD) for any Microprocessor-controlled Prostheses.





### **Health Technology Clinical Committee Authority**

Washington State's legislature believes it is important to use a scientific 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, through its Health Technology Assessment program to engage in a process for evaluation process that gathers and assesses the quality of the latest medical evidence using a scientific research company and 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 Health Technology Clinical Committee (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 their 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.