

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

Topic: Hyaluronic acid (HA)/Platelet-rich plasma (PRP)

Meeting date: July 21, 2023

Final adoption: November 17, 2023

Number and coverage topic:

20230721A – Hyaluronic acid/platelet-rich plasma for knee or hip osteoarthritis

HTCC coverage determination:

HA for treatment of knee and hip osteoarthritis is **not a covered benefit**

PRP for treatment of knee and hip osteoarthritis is **not a covered benefit**

HTCC reimbursement determination:

Limitations of coverage: N/A

Non-covered indicators: N/A

Related documents:

- [Final key questions](#)
- [Final evidence report](#)
- [Meeting materials and transcript](#)

Agency contact information:

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

Final

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 separately on the evidence for the use of HA and PRP for knee and hip osteoarthritis. The committee decided that the current evidence on HA and PRP for knee and hip osteoarthritis was sufficient to determine non-coverage. The committee considered the evidence, public comment and expert input, 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 HA/PRP for knee or hip osteoarthritis.

	Not covered	Covered under certain conditions	Covered unconditionally
HA for knee osteoarthritis	9	0	0
HA for hip osteoarthritis	9	0	0
PRP for knee osteoarthritis	5	4	0
PRP for hip osteoarthritis	9	0	0

Discussion

The committee reviewed and discussed the available studies for use of HA and PRP for knee and hip osteoarthritis. Details of study design, inclusion criteria, outcomes and other factors affecting study quality were discussed. A majority of committee members found the evidence sufficient to determine that use of HA and PRP for knee and hip osteoarthritis to be unproven for being safer, more effective, or more cost-effective than comparators.

Action

The committee checked for availability of a Centers for Medicare and Medicaid Services (CMS) national coverage decision (NCD). Based on the information provided in the systematic review, there is no NCD for hyaluronic acid or platelet-rich plasma for the treatment of knee or hip osteoarthritis.

The committee discussed clinical guidelines identified from the following organizations:

- American Academy of Orthopaedic Surgeons, 2022, *Management of Osteoarthritis of the Knee (Nonarthroplasty), Third Edition*
- American College of Rheumatology (ACR), 2020, *Guideline for the Management of Osteoarthritis of the Hand, Hip, and Knee*
- Veterans Affairs/Department of Defense, 2020, *Clinical practice guideline for the non-surgical management of hip & knee osteoarthritis*
- Phillips et al., 2021, *A Systematic Review of Current Clinical Practice Guidelines on Intra-articular Hyaluronic Acid, Corticosteroid, and Platelet-Rich Plasma Injection for Knee Osteoarthritis*

The recommendations of the guidelines vary. The committee’s determination is consistent with the noted guidelines.

HTA staff will prepare a findings and decision document on use of HA/PRP for the treatment of knee and hip osteoarthritis for public comment to be followed by consideration for final approval at the next committee 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 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.