

## Health Technology Clinical Committee

**Date:** June 18, 2021  
**Time:** 8:00 a.m. – 12:30 p.m.  
**Location:** Zoom webinar  
**Adopted:** July 9, 2021

Meeting materials and transcript are available on the [HTA website](#).

### HTCC Minutes

**Members present:** Larry Birger, MD; John Bramhall, MD, PhD; Clinton Daniels, DC, MS; Janna Friedly, MD; Conor Kleweno, MD; Chris Hearne, DNP, MPH; Christoph Lee, MD, MS, MBA; Laurie Mischley, ND, MPH, PhD; Sheila Rege, MD; Mika Sinanan, MD, PhD; Tony Yen, MD

**Clinical expert:** Randall M. Chesnut, MD

### HTCC Formal Action

- 1. Call to order:** Dr. Rege, chair, called the meeting to order; members present constituted a quorum.
- 2. HTA program updates:** Josh Morse, program director, presented HTCC meeting protocols and guidelines, a high-level overview of the HTA program, how to participate in the HTCC process, and upcoming topics.
- 3. Previous meeting business:**

**November 20, 2020 meeting minutes:** Draft minutes reviewed. Motion made and seconded to approve the minutes as written.

*Action:* Seven committee members approved the November 20, 2020 meeting minutes. Four members abstained.
- 4. Sacroiliac joint fusion: rereview 2021:**

**Clinical expert:** The chair introduced Randall Chesnut, MD, Professor, Department of Neurological Surgery, University of Washington Harborview Medical Center; Joint Professor, Dept of Orthopaedics and Sports Medicine, University of Washington Harborview Medical Center; Integra Endowed Professor of Neurotrauma, Department of Neurological Surgery, University of Washington Harborview Medical Center, University of Washington, Seattle, WA.

**Agency utilization and outcomes:** Emily Transue, MD, MHA, Medical Director, Employee and Retiree Benefits, Health Care Authority, presented the state agency perspective on the sacroiliac joint fusion rereview 2021. Find the full presentation published with the [June 18 meeting materials](#).

**Final**

**Scheduled and open public comments:** Chair called for public comments. Comments were provided by:

- Peter Ameglio, MD, Ameglio Orthopedics, Fort Meyers, FL
- Thomas Flory, Executive Director North Corner Neurosurgical Associates, Bellingham, WA
- Roland Kent, MD, Axis Spine Center, Post Falls, ID
- Morgan Lorio, MD, Orthopaedic and Laser Spine Surgery, Fort Myers, FL
- David Polly, Jr, MD, University of Minnesota, Minneapolis, MN
- Cheri Sommers, ARNP, Multicare, Spokane, WA

All comments are included in the [June 18 meeting transcript](#).

**Vendor report/HTCC question and answers:** Leila Kahwati, MD, MPH, Research Triangle Institute, Inc. presented the evidence review for sacroiliac joint fusion. Find the full presentation published with the [June 18 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 with updated literature since 2018, public comments, and state agency utilization information. The committee decided that the current evidence on sacroiliac joint fusion was sufficient to make a determination, discussed and voted on the evidence for the use of sacroiliac joint fusion. 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 minimally invasive or open sacroiliac joint fusion for sacroiliac chronic joint pain related to degenerative sacroiliitis and/or sacroiliac joint dysfunction for adults 18 years old and older. One committee member recused himself from the vote.

|                         | Not covered | Covered under certain conditions | Covered unconditionally |
|-------------------------|-------------|----------------------------------|-------------------------|
| Sacroiliac joint fusion | 10          | 0                                | 0                       |

***Discussion***

The committee reviewed and discussed the available studies for use of sacroiliac joint fusion for chronic sacroiliac joint pain related to degenerative sacroiliitis and/or sacroiliac joint dysfunction. 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 sacroiliac joint fusion for chronic sacroiliac joint pain related to degenerative sacroiliitis and/or sacroiliac joint dysfunction to be unproven for being safer, more effective, or more cost-effective than comparators.

***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 NCD for sacroiliac joint fusion for sacroiliac joint pain related to degenerative sacroiliitis and/or sacroiliac joint dysfunction at this time.

The committee discussed clinical guidelines identified for sacroiliac joint fusion from the following organizations:

- AIM Specialty Health *Musculoskeletal Program Clinical Appropriateness Guidelines: Sacroiliac Joint Fusion*, (2020)
- eviCore *Clinical Guidelines Spine Surgery*, (2020)
- International Society for the Advancement of Spine Surgery *International Society for the Advancement of Spine Surgery Policy 2020 Update—Minimally Invasive Surgical Sacroiliac Joint Fusion (for Chronic Sacroiliac Joint Pain): Coverage Indications, Limitations, and Medical Necessity*, (2020)
- North American Spine Society (NASS) *Diagnosis and Treatment of Low Back Pain*, (2020)
- National Institute for Health and Care Excellence (NICE) *iFuse for treating chronic sacroiliac joint pain*, (2018)
- National Institute for Health and Care Excellence (NICE) *Minimally invasive sacroiliac joint fusion surgery for chronic sacroiliac pain - Intervention Procedure Guidance 578*, (2017)

The committee's determination is not consistent with the noted guidelines. The HTCC determination included consideration of local, clinical expert considerations related to the complexities of revision surgeries, concerns related to diffusion, and uncertainty of evidence for safety and cost-effectiveness. The quality of evidence assessment was either not performed or not reported for these guidelines.

The committee chair directed HTA staff to prepare a findings and decision document on use of sacroiliac joint fusion for public comment to be followed by consideration for final approval at the next committee meeting.

**Action**

The chair directed agency staff to prepare a draft findings and decision for the sacroiliac joint fusion: rereview 2021 to be considered by the committee at the next meeting.

**5. Meeting adjourned.**