

Health Technology Clinical Committee Findings and Decision

Topic: Tympanostomy Tubes in Children

Meeting Date: November 20, 2015

Final Adoption: January 15, 2016

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

Number and Coverage Topic:

20151120B – Tympanostomy Tubes in Children

HTCC Coverage Determination:

Tympanostomy tubes for children aged 16 years and younger is a **covered benefit with conditions**.

HTCC Reimbursement Determination:

Limitations of Coverage:

For AOM – Acute Otitis Media:

1. Cover if AOM with complications or individuals immunocompromised or otherwise at-risk for complications of infection, OR
2. With 3 episodes of AOM in the last 6 months or 4 episodes in last 12 months with one occurring in the last 6 months and presence of effusion at the time of assessment for surgical candidacy.

OME – Otitis Media with Effusion

1. Cover if the duration of effusion is 3 months or greater, AND there is documented hearing loss, OR
2. At-risk children:
 - a. Children at risk for persistent effusion based on anatomic abnormalities, OR
 - b. Children at disproportionate risk from the effects of hearing loss, such as those with speech delay, underlying sensory-neuro hearing loss, or cognitive disorders.

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

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 concluded that the current evidence on tympanostomy tubes is sufficient evidence to cover with conditions. The committee discussed and voted separately on the conditions addressed in the key questions and evidence report; persistent acute otitis media (AOM) and chronic otitis media with effusion (OME). 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 cover tympanostomy tubes in children with conditions.

	Not Covered	Covered Under Certain Conditions	Covered Unconditionally
Tympanostomy Tubes for AOM	0	11	0
Tympanostomy Tubes for OME	0	11	0

Discussion

The chair called for discussion of conditions of coverage for tympanostomy tubes for AOM and OME. A majority of the committee voted for coverage with conditions. The following conditions were discussed and approved by the clinical committee:

Limitations:

Patients aged 16 years and younger

For AOM – Acute Otitis Media:

1. Cover if AOM with complications or individuals immunocompromised or otherwise at-risk for complications of infection, OR
2. With 3 episodes of AOM in the last 6 months or 4 episodes in last 12 months with one occurring in the last 6 months and presence of effusion at the time of assessment for surgical candidacy.

OME – Otitis Media with Effusion

1. Cover if duration of effusion 3 months or greater, AND documented hearing loss, OR
2. At-risk children:
 - a. Children at risk for persistent effusion based on anatomic abnormalities, OR
 - b. Children at disproportionate risk of hearing loss, such as speech delay, underlying sensory-neuro hearing loss, or cognitive disorders.

Action

The committee checked for availability of a Medicare national coverage decision (NCD). There is no NCD for tympanostomy tubes.

The committee discussed clinical guidelines identified for tympanostomy tubes including guidelines from the following organizations:

- The American Academy of Otolaryngology - Head and Neck Surgery Foundation (2013)
- American Academy of Pediatrics (2013)
- British Columbia Medical Association, British Columbia Ministry of Health Services, Guidelines and Protocols Advisory Committee
- National Institute for Health and Care Excellence (NICE)

The chair noted lack of concordance among some of the guidelines. The committee determination agreed with some of the guidelines; differences were cited as due to interpretation of the evidence.

The committee chair directed HTA staff to prepare a findings and decision document on tympanostomy tubes 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.