HIP RESURFACING

- Partial Hip Resurfacing
- Total Hip Resurfacing

Coverage for services, procedures, medical devices and drugs are dependent upon benefit eligibility as outlined in the member's specific benefit plan. This Medical Coverage Guideline must be read in its entirety to determine coverage eligibility, if any.

The section identified as "Description" defines or describes a service, procedure, medical device or drug and is in no way intended as a statement of medical necessity and/or coverage.

The section identified as "Criteria" defines criteria to determine whether a service, procedure, medical device or drug is considered medically necessary or experimental or investigational.

State or federal mandates, e.g., FEP program, may dictate that any drug, device or biological product approved by the U.S. Food and Drug Administration (FDA) may not be considered experimental or investigational and thus the drug, device or biological product may be assessed only on the basis of medical necessity.

Medical Coverage Guidelines are subject to change as new information becomes available.

For purposes of this Medical Coverage Guideline, the terms "experimental" and "investigational" are considered to be interchangeable.

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Description:

Hip resurfacing can be categorized as partial hip resurfacing, in which a femoral shell is implanted over the femoral head, and total hip resurfacing, consisting of femoral and acetabular shells.

Partial Hip Resurfacing:
Partial hip resurfacing is considered a treatment option for avascular necrosis (osteonecrosis) with collapse of the femoral head. Partial hip resurfacing may also be referred to as hemi resurfacing.

Total Hip Resurfacing:
Total hip resurfacing has been considered as an alternative to total hip arthroplasty particularly when an individual may outlive a total hip prosthesis.
HIP RESURFACING (cont.)

Criteria:

Partial Hip Resurfacing:

- Partial hip resurfacing as an alternative to total hip replacement with an FDA-approved device is considered **medically necessary** with documentation of **ALL** of the following:
  1. Osteonecrosis of the femoral head
  2. Individual likely to outlive a traditional prosthesis
  3. No more than 50% involvement of the femoral head
  4. Minimal change in acetabular cartilage or articular cartilage space identified on radiography
  5. One or more contraindications for metal-on-metal implants (e.g., individual has known or suspected metal sensitivity, individual has concern about potential effects of metal ions)

- Partial hip resurfacing for all other indications not previously listed is considered **experimental or investigational** based upon:
  1. Insufficient scientific evidence to permit conclusions concerning the effect on health outcomes, and
  2. Insufficient evidence to support improvement of the net health outcome, and
  3. Insufficient evidence to support improvement of the net health outcome as much as, or more than, established alternatives, and
  4. Insufficient evidence to support improvement outside the investigational setting.

These indications include, but are not limited to:

- Ankylosis
- Hip dysplasia
- Osteoarthritis without evidence of osteonecrosis
- Post-traumatic arthritis
- Protrusion acetabuli
- Rheumatoid arthritis
- Slipped capital femoral epiphysis

Total Hip Resurfacing:

- Metal-on-metal total hip resurfacing as an alternative to total hip replacement with an FDA-approved device system is considered **medically necessary** with documentation of **ALL** of the following:
  1. Individual is a candidate for total hip replacement
  2. Individual is likely to outlive a traditional prosthesis
HIP RESURFACING (cont.)

Resources:


7. California Technology Assessment Forum. Metal on Metal Hip Resurfacing as an Alternative to Total Hip Arthroplasty (Musculoskeletal). Blue Shield of California Foundation. 06/02/2010


HIP RESURFACING (cont.)

Resources: (cont.)


