

Hyaluronic Acid Intra-articular Products

When requesting hyaluronic acid intra-articular products, the individual requiring treatment must be diagnosed with the following FDA-approved indication and meet the specific coverage guidelines and applicable safety criteria for the covered indication.

The following hyaluronic acid intra-articular products are included in this policy: Hyalgan® (sodium hyaluronate), Supartz FX® (sodium hyaluronate), Hymovis® (hyaluronan), Euflexxa® (sodium hyaluronate), Orthovisc® (hyaluronan), Synvisc® (hylan G-F 20), Synvisc-One® (hylan G-F 20), Gel-One® (sodium hyaluronate), Monovisc® (hyaluronan), Gel-Syn®-3 (sodium hyaluronate), Genvisc® 850 (sodium hyaluronate), Durolane® (sodium hyaluronate), TriVisc® (sodium hyaluronate), Triluron® (sodium hyaluronate), Sodium hyaluronate 1% injection, Synjoynt (sodium hyaluronate 1% injection), and Visco-3® (sodium hyaluronate).

FDA-approved Indication

Indicated for the treatment of pain in osteoarthritis of the knee in individuals who have failed to respond adequately to conservative non-pharmacologic therapy and analgesics (e.g., non-steroidal anti-inflammatory drugs and acetaminophen).

Coverage Guidelines

Osteoarthritis (OA) of the Knee

The patient must meet **all** the following conditions for initial approval:

- Diagnosis of the knee to be treated is confirmed by radiological evidence of knee OA (e.g., x-ray, magnetic resonance imaging [MRI], computed tomography [CT] scan, ultrasound);
- Has tried at least TWO of the following three modalities of therapy for OA:
 - o At least one course of physical therapy (PT) for knee OA;
 - o At least TWO of the following pharmacological therapies:
 - Nonsteroidal anti-inflammatory drug (NSAID), oral or topical (examples of oral agents include: naproxen, ibuprofen, Celebrex; examples of topical NSAIDs include: diclofenac solution or gel);
(Note: a trial of two or more NSAIDs [oral and/or topical] counts as one pharmacological therapy.)
 - Acetaminophen;
 - Tramadol (Ultram);
 - Duloxetine (Cymbalta);
 - o At least TWO injections of intra-articular corticosteroids to the affected knee; AND
- The product is administered by or under the supervision of a physician specializing in rheumatology, orthopedic surgery, or physical medicine and rehabilitation (physiatrist).

The patient must meet **all** of the following conditions for reauthorization if the patient has already received a course in the same knee:

- At least 6 months have elapsed since the last injection with any hyaluronic acid derivative;
- Had a response to the previous course of hyaluronic acid derivative therapy for osteoarthritis of the knee (e.g., reduced joint pain, tenderness, or morning stiffness, improved mobility) and now requires additional therapy for osteoarthritis symptoms;
- The product is administered by or under the supervision of a physician specializing in rheumatology, orthopedic surgery, or physical medicine and rehabilitation (physiatrist).

Approval duration (initial and renewal): 6 months

Dosing Recommendations

Product	Number of injections per course
Durolane	One injection given one time
Euflexxa	Three injections given 1 week apart
Gel-One	One injection given one time
Gelsyn-3	Three injections given 1 week apart
GenVisc 850	Five injections given 1 week apart
Hyalgan	Five injections given 1 week apart
Hymovisc	Two injections given 1 week apart
Monovisc	One injection given one time
Orthovisc	Three or four injections given 1 week apart
Sodium hyaluronate 1%	Three injections given 1 week apart
Synjoynt	Three injections given 1 week apart
Synvisc	Three injections given 1 week apart
Synvisc-One	One injection given one time
Supartz FX	Five injections given 1 week apart
Triluron	Three injections given 1 week apart
TriVisc	Three injections given 1 week apart
Visco-3	Three injections given 1 week apart

References

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