PriorityHealth

MEDICAL POLICY
No. 91553-R0

PLATELET RICH PLASMA/PLATELET RICH FIBRIN MATRIX

Effective Date: July 18, 2008	**Review Dates: 6/08, 6/09, 6/10**
Date Of Origin: June 2008	**Status: Current**

I. DESCRIPTION

Platelet rich plasma (PRP) and fibrin matrix (PRFM), or autologous platelet-derived growth factors, are proposed as an adjunct to standard treatment for a number of indications including wound care for the treatment of diabetic ulcers and venous stasis ulcers, bone augmentation and fusion, tendonitis, and plantar fasciitis.

Administration of PRP is a procedure and is, therefore, not subject to regulation by the Food and Drug Administration (FDA). However, the devices used to prepare PRP are regulated by the FDA premarket approval process. Several centrifuge devices have been approved by the FDA for preparation of PRP.

One example of a commercially available device, the Cascade® Autologous Platelet System produces a completely autologous platelet biologic with a high concentration of viable platelets, extracted from a small amount of the patient's own blood, spun through a centrifugation process and resulting in a dense suturable platelet rich fibrin matrix (PRFM) that can be delivered directly to the tear site and sutured in place to potentially stimulate a reparative healing response for soft tissue and bone repair.

There is insufficient evidence to support the use of autologous platelet-derived growth factors for any indication at this time.

II. POLICY/CRITERIA

Platelet rich plasma (Autologous blood-derived growth factors) is considered investigational for all indications including but not limited to:

A. Chronic non-healing wounds
B. Epicondylitis (e.g., tennis elbow, elbow epicondylar tendinosis)
C. Plantar fasciitis
D. Dupuytren's contracture
E. Bone healing and fusion, including as an adjunct to spinal fusion
F. Sinus surgery

III. MEDICAL NECESSITY REVIEW

☐ Required ☐ Not Required ☒ Not Applicable

IV. APPLICATION TO PRODUCTS

Coverage is subject to member's specific benefits. Group specific policy will supersede this policy when applicable.

- **HMO/EPO:** ***This policy applies to insured HMO/EPO plans.***
- **POS:** ***This policy applies to insured POS plans.***
- **PPO:** ***This policy applies to insured PPO plans.***
- **ASO:** ***For self-funded plans, consult individual plan documents. If there is a conflict between this policy and a self-funded plan document, the provisions of the plan document will govern.***
- **INDIVIDUAL:** ***For individual policies, consult the individual insurance policy. If there is a conflict between this medical policy and the individual insurance policy document, the provisions of the individual insurance policy will govern.***
- **MEDICARE:** ***Coverage is determined by the Centers for Medicare and Medicaid Services (CMS).***
- **MEDICAID:** ***If there is a discrepancy between this policy and the Michigan Medicaid Provider Manual and the Michigan Medicaid Fee Schedule, the Michigan Medicaid Provider Manual and the Michigan Medicaid Fee Schedule at:*** *http://www.michigan.gov/mdch/0,1607,7-132-2945_42542_42543_42546_42551-159815--,00.html* ***will govern.***
- **MICHILD:** ***For MICHILD members, this policy will apply unless MICHILD certificate of coverage limits or extends coverage.***

V. CODING INFORMATION

ICD9 Codes: *Not specified*

CPT/HCPCS codes:

0232T Injection(s), platelet rich plasma, any tissue, including image guidance, harvesting and preparation when performed (*effective 07.01.2010)*

86999 Unlisted transfusion medicine procedure (*Not covered if billed for this procedure. Explanatory notes must accompany claim - use above code as of 07.01.2010)*

Facility Billing

P9020 Platelet rich plasma, each unit

With Revenue codes:

0384 Platelets

0390 Administration, Processing and Storage for Blood and Blood Components, General

0399 Other processing and storage

VI. REFERENCES

1. Hayes, Inc. Hayes Search & Summary. Platelet Injections for Treatment of Plantar Fasciitis. Lansdale, PA: Hayes, Inc.; October 23, 2006
2. Hayes, Inc. Hayes Search & Summary. Platelet-Rich Plasma for Bone Healing and Fusion. Lansdale, PA: Hayes, Inc.; January 15, 2007.
3. Hayes, Inc. Hayes Technology Brief. Autologous Platelet-Rich Plasma to Aid Bone Fusion Following Ankle Surgery. Lansdale, PA: Hayes, Inc.; July 25, 2007.
4. Autologous Blood-Derived Growth Factors as a Treatment for Wound Healing and Other Miscellaneous Conditions, The Regence Group Medical Policy. February 2007. Available on the World Wide Web @ http://blue.regence.com/trgmedpol/medicine/med77.html (Retrieved May 14, 2008)
5. Wound Healing: Tissue-Engineered Skin Substitutes and Growth Factors Cigna Healthcare Coverage Position, May 2007. Available on the World Wide Web @ http://www.cigna.com/customer_care/healthcare_professional/coverage_positions/index.html (Retrieved May 14, 2008 & April 30,2010)
6. Bone and Tendon Graft Substitutes and Adjuncts, Aetna Clinical Policy Bulletin, August 2007. Available on the World Wide Web @ http://www.aetna.com/cpb/medical/data/400_499/0411.html (Retrieved May 14, 2008 & April 30, 2010)
7. Sample Letter of Medical Necessity Initial Claim Elbow Epicondylar Tendinosis, Cascade Medical Enterprises. April 2008