

JRF ORTHO – INSURANCE ASSISTANCE DOCUMENT

Summary of medical criteria for OCAs

Aetna

Policy Title: Allograft Transplants of the Extremities

Original Policy: 12/03/1999

Last Review: 08/21/2018

Next Review: 03/28/2019

Policy #: 0364

	Criteria for medical necessity of osteochondral allograft transplantation to treat cartilaginous defects of the knee (femoral articulation only)
Medical necessity	A-C are independent of the other listed criteria below, D is dependent on all other criteria. A. Avascular necrosis lesions of the femoral condyle; or B. Non-repairable stage 3 or 4 osteochondritis dissecans; or C. Otherwise healthy, active, non-elderly members who have either failed earlier arthroscopic procedures or are not candidates for such procedures because of the size, shape, or location of the lesion; or D. Treatment of a focal lesion that meets the criteria (rows below)
Medical evaluation	Arthroscopic or magnetic resonance imaging (MRI) examination results detailing size, location and type of osteochondral defect
Cartilage defect size	2 cm or more in diameter
Cartilage defect characterization	Full-thickness depth (grade 3 or 4) lesion
Cause of defect	NR
Lesion (defect) and surrounding cartilage	Preferably surrounded by normal, healthy (non-arthritic) cartilage
Patient demographic	NR
Patient condition	Causing disabling localized knee pain
Prior treatment	Unresponsive to conservative treatment (e.g. medication, physical therapy)
Joint health	The opposing articular surface should be generally free of disease or injury, including no arthritis on the corresponding tibial surface
Knee stability	Normal knee alignment or knee alignment will be surgically corrected (i.e., by osteotomy) at time of allograft
OCA for other joints	Aetna considers osteochondral allograft of the talus experimental and investigational because there are unanswered questions regarding the clinical outcomes of this approach when compared with ankle arthrodesis, especially in terms of pain, disability, functionality and durability.
Patient compliance	NR

*Aetna also considers osteochondral allograft as investigational for the following:

- Individuals who have had a previous total meniscectomy;
- Individuals with a cartilaginous defect associated with osteoarthritis or inflammatory diseases or where an osteoarthritic or inflammatory process significantly and adversely affects the quality of the perilesional cartilage;
- All other indications, including dysplasia epiphysealis hemimelica (Trevor's disease), femoral trochlear dysplasia, ilio-tibial band repair, shoulder instability, tarso-metatarsal arthrodesis,

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repairing chondral defects/lesions of the ankle, elbow, hip, patella, patello-femoral ligament, and shoulder (e.g., acromio-clavicular (AC) separation, Hill Sachs lesions) because its effectiveness has not been established.