SACROILIAC JOINT FUSION

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.

This Medical Coverage Guideline provides information related to coverage determinations only and does not imply that a service or treatment is clinically appropriate or inappropriate. The provider and the member are responsible for all decisions regarding the appropriateness of care. Providers should provide BCBSAZ complete medical rationale when requesting any exceptions to these guidelines.

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:

The sacroiliac (SI) joint is located in the pelvis and links the iliac bones (pelvis) to the spine. Similar to other joints, the SI joint can become damaged. Open, minimally invasive and percutaneous SI joint fusion are surgical procedures which fuses the iliac bone (pelvis) to the spine (sacrum) and are performed for a variety of orthopedic conditions including trauma, infection, cancer and as part of multisegmental long fusions for the correction of spinal deformity (e.g., idiopathic scoliosis, neuromuscular scoliosis). Plates and/or screws are placed to develop a bony fusion across the SI joint for stabilization. SI joint fusion has been investigated for treatment of back pain presumed to originate from the SI joint.
SACROILIAC JOINT FUSION (cont.)

Description: (cont.)

Percutaneous or minimally invasive fixation/fusion devices include iFUSE Implant System®, Symmetry® Sacroiliac Joint Fusion System, SI-LOK® Sacroiliac Joint Fixation System and Silex™ Sacroiliac Joint Fusion System.

Criteria:

- Fusion/stabilization of the sacroiliac joint is considered medically necessary with documentation of ANY of the following:
  1. As an adjunct to sacrectomy or partial sacrectomy related to tumors involving the sacrum
  2. As an adjunct to the medical treatment of sacroiliac joint infection/sepsis
  3. Severe traumatic injuries associated with pelvic ring fracture
  4. During multisegment spinal constructs (for example, correction of deformity in scoliosis or kyphosis surgery) extending to the ilium

- Fusion/stabilization of the sacroiliac joint for the treatment of back pain presumed to originate from the SI joint or if above criteria not met is considered experimental or investigational, including, but not limited to, percutaneous and minimally invasive techniques 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.
SACROILIAC JOINT FUSION (cont.)

Resources:

Literature reviewed 09/27/16. We do not include marketing materials, poster boards and non-published literature in our review.

The BCBS Association Medical Policy Reference Manual (MPRM) policy is included in our guideline review. References cited in the MPRM policy are not duplicated on this guideline.


9. Cher DJ, Reckling WC. Quality of life in preoperative patients with sacroiliac joint dysfunction is at least as depressed as in other lumbar spinal conditions. *Med Devices (Auckl).* 2015;8:395-403.
SACROILIAC JOINT FUSION (cont.)

Resources: (cont.)


SACROILIAC JOINT FUSION (cont.)

Resources: (cont.)


SACROILIAC JOINT FUSION (cont.)

Resources: (cont.)


FDA Summary Statements for sacroiliac joint fixation. Device names include, but are not limited to:

iFuse Implant System
Silex Sacroiliac Joint Fusion System

- FDA-approved indication: For sacroiliac joint fusion for conditions including sacroiliac joint disruptions and degenerative sacroilitis.

FDA 510K Summary for Symmetry Sacroiliac Joint Fusion System:

- FDA-approved indication: For fixation of large bones, including bones of the pelvis, for conditions including degenerative sacroilitis and sacroiliac joint disruptions.