



Medica Central Medical Policy

Policy Name: Allogeneic Morphogenic Protein (e.g., OsteoAMP™) MP9776

Effective Date: 09/01/2024

Important Information – Please Read Before Using This Policy

These services may or may not be covered by all Medica Central plans. Coverage is subject to requirements in applicable federal or state laws. Please refer to the member's plan document for other specific coverage information. If there is a difference between this general information and the member's plan document, the member's plan document will be used to determine coverage. With respect to Medicare, Medicaid, and other government programs, this policy will apply unless these programs require different coverage.

Members may contact Medica Customer Service at the phone number listed on their member identification card to discuss their benefits more specifically. Providers with questions may call the Provider Service Center. Please use the Quick Reference Guide on the Provider Communications page for the appropriate phone number. <https://mo-central.medica.com/Providers/SSM-employee-health-plan-for-IL-MO-OK-providers>

Medica Central coverage policies are not medical advice. Members should consult with appropriate health care providers to obtain needed medical advice, care, and treatment.

NOTE:Medica is using clinical criteria developed by Carelon, a utilization management (UM) program third-party vendor, to assist in administering medical necessity criteria for recombinant human bone morphogenetic protein (rhBMP-2).

Coverage Policy

Allogeneic morphogenic protein (e.g., OsteoAMP™) is considered investigative and unproven and therefore **NOT COVERED**. There is insufficient reliable evidence in the form of high-quality peer-reviewed medical literature to establish the efficacy or effects on health care outcomes.

Description

Osteogenic proteins (aka bone morphogenetic or morphogenic proteins; BMPs), are a family of bone-matrix polypeptides derived from a variety of mammalian species. Implantation induces a cascade of cellular events which are intended to result in formation of new bone at the treatment site. Seven BMPs have been identified with RhBMP-2/InFUSE (Medtronic, Inc.) and OsteoAMP (Bioventus, LLC) that are commercially available for use in the United States. BMP is being purported for use in treating orthopedic conditions, such as use in spinal fusion and tibial repair procedures. It is used with various types of spinal spacers and fixation instruments.

Prior Authorization

Prior authorization is not applicable. Claims for this service are subject to retrospective review and denial of coverage, as investigative services are not eligible for reimbursement.



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Coding Considerations

Use the current applicable CPT/HCPCS code(s).

Original Effective Date: Created 05/15/2024, Effective 09/01/2024

Re-Review Date(s):

Administrative
Update:

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