Corporate Medical Policy

Capsaicin (Qutenza®) – “Notification”

This policy is NOT effective until October 1, 2012

Description of Procedure or Service

Capsaicin (Qutenza®) is a concentrated synthetic version of the substance found in chili peppers. It is given via a dermal patch for relief of post herpetic neuralgia. Post herpetic neuralgia is a result of shingles and causes severe pain.

Capsaicin (Qutenza®) delivers medication directly to nerves and selectively binds with the protein, transient receptor potential vanilloid 1 receptor (TRPV1) that resides in the pain and heat sensing neurons.

Special training is necessary for the application of Capsaicin (Qutenza®) including use of special gloves and disposal to avoid accidental contact. The area of pain is marked and anesthetized prior to application of the dermal patch. The patch is applied to the area identified that is painful for one hour. Pain and heat are experienced during the application and may require cold compresses and pain medication. The patient’s BP should be monitored during the application since this substance tends to increase BP.

Pain relief occurs during the first week after the application and may last up to 3 months or more. Immediately after the application, the patient is sensitive to heat and should avoid hot showers, sun, and extreme exercise. Over the course of several months, there may be a gradual re-emergence of painful neuropathy thought to be due to TRPV1 nerve fiber reinnervation of the treated area.

***Note: This Medical Policy is complex and technical. For questions concerning the technical language and/or specific clinical indications for its use, please consult your physician.

Policy

BCBSNC will provide coverage for Capsaicin (Qutenza®) when it is determined to be medically necessary because the medical criteria and guidelines noted below are met.

Benefits Application

This medical policy relates only to the services or supplies described herein. Please refer to the Member's Benefit Booklet for availability of benefits. Member's benefits may vary according to benefit design;
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therefore member benefit language should be reviewed before applying the terms of this medical policy.

When Capsaicin (Qutenza®) is covered

Capsaicin (Qutenza®) may be considered medically necessary when the following criteria are met.
1. Diagnosis of post herpetic neuralgia (PHN) for at least 6 months AND
2. Only physicians or health care professionals under the close supervision of a physician are to administer Qutenza AND
3. No more than 4 patches are to be applied every 90 days

When Capsaicin (Qutenza®) is not covered

Use of Capsaicin (Qutenza®) is considered investigational for all indications that do not meet the medical necessity criteria listed above.

Policy Guidelines

Billing/Coding/Physician Documentation Information

This policy may apply to the following codes. Inclusion of a code in this section does not guarantee that it will be reimbursed. For further information on reimbursement guidelines, please see Administrative Policies on the Blue Cross Blue Shield of North Carolina web site at www.bcbsnc.com. They are listed in the Category Search on the Medical Policy search page.

Applicable codes: J7335, 64999, 96999

BCBSNC may request medical records for determination of medical necessity. When medical records are requested, letters of support and/or explanation are often useful, but are not sufficient documentation unless all specific information needed to make a medical necessity determination is included.

Scientific Background and Reference Sources


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Medical Director – 5/2012

Policy Implementation/Update Information

6/29/12  New policy. “Capsaicin (Qutenza®) may be considered medically necessary when criteria are met. Medical Director review XXXXX. Notification given 6/29/2012. Policy effective 10/1/2012.

Medical policy is not an authorization, certification, explanation of benefits or a contract. Benefits and eligibility are determined before medical guidelines and payment guidelines are applied. Benefits are determined by the group contract and subscriber certificate that is in effect at the time services are rendered. This document is solely provided for informational purposes only and is based on research of current medical literature and review of common medical practices in the treatment and diagnosis of disease. Medical practices and knowledge are constantly changing and BCBSNC reserves the right to review and revise its medical policies periodically.