



NHS MEDICAL POLICY

OnabotulinumtoxinA Medicine 2014-003

This policy is intended to supplement Milliman Care Guidelines. All other indications listed in Milliman Care Guidelines ACG: A-0296 (AC) current version should be followed. In addition to the indications listed in Milliman Care Guidelines, the following apply: OnabotulinumtoxinA may be ALSO indicated for any ONE of the following:

1	OnabotulinumtoxinA may be ALSO indicated for Upper or LOWER extremity spasticity in adult due to stroke.
2	OnabotulinumtoxinA may be ALSO indicated for Upper or LOWER extremity focal dystonia with all of the following documented: <ul style="list-style-type: none"> • Age 16 years or older • Extremity pain or abnormal extremity position causing adverse effect on daily functioning • No infection at proposed injection site • No prior surgical treatment
3	OnabotulinumtoxinA injections may be continued and certified for a period of 12 months with ALL of the following conditions met: <ul style="list-style-type: none"> • The condition or indication originally met criteria when the injections were started. • Maintenance injections will be given no more frequently than every 3 months. • The provider has documented ongoing benefit from the injections. • The provider has documented that the patient is tolerating the injections with no adverse effects.

SOURCES

1. Botulinum neurotoxin for the treatment of spasticity (an evidence based review.) Report of the Therapeutics and Technology Assessment Subcommittee of the American Academy of Neurology. Neurology, May 6, 2008, vol. 70, no. 19, 1691-8.

2. Elia AE, et al, Botulinum neurotoxins for post stroke spasticity in adults: a systematic review. *Mov Disord.* Apr 30, 2009; 24(6):801-12.
3. Rosales, RL, Evidence based systematic review on the efficacy and safety of botulinum toxin-A therapy in post stroke spasticity. *J Neural Transm* 2008; 115(4):617-23.
4. Yablon SA, et al, Dose response with onabotulinumtoxinA for post stroke spasticity: a pooled data analysis. *Mov Disord.* Feb 1, 2011; 26(2):209-15.
5. Aurora SK, Dodick DW, Turkel CC, et al. OnabotulinumtoxinA for treatment of chronic migraine: results from the double-blind, randomized, placebo-controlled phase of the PREEMPT 1 trial. *Cephalalgia* 2010; 30:793.
6. Diener HC, Dodick DW, Aurora SK, et al. OnabotulinumtoxinA for treatment of chronic migraine: results from the double-blind, randomized, placebo-controlled phase of the PREEMPT 2 trial. *Cephalalgia* 2010; 30:804.
7. Dodick DW, Turkel CC, DeGryse RE, et al. OnabotulinumtoxinA for treatment of chronic migraine: pooled results from the double-blind, randomized, placebo-controlled phases of the PREEMPT clinical program. *Headache* 2010; 50:921.

CODE REFERENCE (This may not be a comprehensive list of codes to apply to this policy.)

J0585, 64616, 64617, 64642, 64643, 64644, 64645, 64646, 64647

POLICY HISTORY/REVISION INFORMATION

Date	Action/Description
09/25/2015	Annual review and approval by UM Committee
02/26/2016	Annual review and approval by UM Committee
03/10/2016	Language in #3 has been updated
12/14/2016	Annual review and approval by UM Committee
12/13/2017	Annual review and approval by UM Committee
12/13/2018	Annual review and approval by UM Committee
12/12/2019	Annual review and approval by UM Committee
12/10/2020	Annual review and approval by UM Committee
12/10/2021	Annual review and approval by UM Committee
12/21/2022	Annual review and approval by UM Committee
12/20/2023	Annual review and approval by UM/QM Committee
12/23/2024	Annual review and approval by UM/QM Committee