Botulinum Toxin Indications
Adjudication Guideline

Abstract

For Members

Botulinum toxin is a protein and neurotoxin produced by a bacterium. Botulinum toxin is a highly toxic substance which can cause botulism, a serious and life-threatening illness in humans and animals. However, by injecting very tiny amounts into a specific muscle or skin, botulinum toxin is being used for therapeutic purposes for adults like sustained and repetitive contraction of neck muscles, excessive underarm sweating, urinary incontinence, chronic migraine etc.

Daman covers treatment with botulinum toxin if medically necessary and as per the policy terms and conditions of each health insurance plan administered by Daman.

Note: All patients must know the box warning by FDA before using this medicine, mentioned further in eligibility and coverage criteria section on page no.2.

For Medical Professionals

Botulinum toxin, also called "miracle poison," is one of the most poisonous biological substances known. It is a neurotoxin produced by the bacterium Clostridium botulinum, an anaerobic, gram-positive, spore-forming rod.

FDA has approved the use of botulinum toxin for certain therapeutic (mentioned further in eligibility and coverage criteria section) and for cosmetic purposes.

Two forms of botulinum toxin type A (Onabotulinumtoxin A (Botox) and Abobotulinumtoxin A (Dysport)), Botulinum A (Xeomin) and one form of botulinum toxin type B (Rimabotulinumtoxin B (MyoBloc)) are available commercially for various cosmetic and medical procedures.

Daman covers all the types of Botulinum Toxin, if medically necessary, for therapeutic purposes only, if failed attempts of at least 6 months of alternative treatment, and as per policy terms and conditions of each health insurance plan administered by Daman.
Botulinum Toxin Indications

Scope

This adjudication rule specifies the coverage details for medically necessary indications of botulinum toxin as per the policy terms and conditions of each health insurance plan administered by Daman.

Adjudication Policy

Eligibility / Coverage Criteria

Types of Botulinum Toxin:
1. Type A
   - Onabotulinumtoxin A (Botox)
   - Abobotulinumtoxin A (Dysport)
   - Botulinum A (Xeomin)
2. Type B
   - Rimabotulinumtoxin B (MYOBLOC)

Daman covers all Types A and Type B of Botulinum Toxin:

1. If medically necessary.
2. Therapeutic purposes only.
3. Failed attempts of at least 6 months of alternative treatment.
4. As per the policy terms and conditions of each health insurance plan administered by Daman.

FDA/Approved Indications:

Note: The below list of indications is not all-inclusive.

<table>
<thead>
<tr>
<th>Brand Name</th>
<th>Approved Indication</th>
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</thead>
<tbody>
<tr>
<td>Botox Type A</td>
<td>• Cervical Dystonia&lt;br&gt;• Blepharospasm and Strabismus&lt;br&gt;• Detrusor Over activity associated with a Neurologic Condition&lt;br&gt;• Overactive Bladder&lt;br&gt;• Primary Axillary Hyperhidrosis&lt;br&gt;• Chronic Migraine&lt;br&gt;• Dynamic equinus foot deformity due to spasticity in ambulant paediatric cerebral palsy patients, two years of age or older.</td>
</tr>
<tr>
<td>Dysport Type A</td>
<td>• Cervical Dystonia&lt;br&gt;• Dynamic equinus foot deformity due to spasticity in ambulant paediatric cerebral palsy patients, two years of age or older.</td>
</tr>
<tr>
<td>Myobloc Type B</td>
<td>• Cervical Dystonia</td>
</tr>
<tr>
<td>Xeomin Type A</td>
<td>• Blepharospasm&lt;br&gt;• Cervical Dystonia&lt;br&gt;• Dynamic equinus foot deformity due to spasticity in ambulant paediatric cerebral palsy patients, two years of age or older.</td>
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</table>

Note: All the indications given above are indicated to be treated only with Onabotulinumtoxin A (Botox), except cervical dystonia which can also be treated with other kinds of botulinum toxins.
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Botox warning by FDA:
Botulinum toxin may spread from the area of injection to other areas of the body, causing symptoms similar to those of botulism. These symptoms can happen hours, days, to weeks after you receive an injection of BOTOX. The symptoms include swallowing and breathing difficulties that can be life-threatening. Other than that there are reported cases for loss of strength and muscle weakness all over the body, double vision, blurred vision and drooping eyelids, hoarseness or change or loss of voice (dysphonia), trouble saying words clearly (dysarthria), loss of bladder control.
The risk of symptoms is probably greatest in children treated for spasticity but symptoms can also occur in adults treated for spasticity and other conditions, particularly in those patients who have underlying conditions that would predispose them to these symptoms. In unapproved uses, including spasticity in children, and in approved indications, cases of spread of effect have been reported at doses comparable to those used to treat cervical dystonia and at lower doses.

Requirements for Coverage:

- ICD and CPT codes must be coded to the highest level of specificity.
- All the indications given above have to be documented with history of at least 6 months of failed attempts of alternative procedures/medications for botulinum toxin treatment to be covered.
- Adjudication of drug will depend on brand used, approved indication and appropriate patient’s age.

Non-Coverage

- Daman does not cover botulinum toxin injections for cosmetic conditions for any plan, as this is a general exclusion for all plans.
- Daman does not cover botulinum toxin injections for basic plan, as they are not tagged as Abu Dhabi in green rain code list.
- Daman does not cover botulinum toxin injections for visitor’s plan.
- Daman does not cover any off label indication for Botulinum toxin unless specifically approved by Health.

Payment and Coding Rules

Please apply HAAD payment rules and regulations and relevant coding manuals for ICD, CPT, etc.

Adjudication Examples

- **Example 1**

  **Question:** A claim received of 25 years old female, premier plan holder for botox injection for palmar hyperhidrosis. Will this claim be covered?

  **Answer:** No, the claim will be rejected with MNEC-003 as botox is not indicated for any hyperhidrosis other than axillary.

- **Example 2**

  **Question:** A claim received for 35 years old male holding regional plan, for botox injection for chronic migraine happening once/twice every month and lasting for an hour. Is this claim payable?

  **Answer:** No, this claim will be rejected with MNEC-003, as treatment with botox is not indicated for migraine happening less than 15 days every month and lasting for less than 4 hours.

- **Example 3**

  **Question:** A claim received for 3 years old male baby holding regional plan, for botox injection for strabismus. Is this claim payable?
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**Answer:** No, this claim will be rejected with CODE-014, as treatment with botox is not indicated for strabismus treatment for less than 12 years of age

**Example 4**

**Question:** A claim received for a 50 years old female holding thiqat plan, for botox injection for overactive bladder, with more than 6 months history of failure of anticholinergic drugs. Is this claim payable?

**Answer:** Yes, this claim is payable.

### Denial codes

<table>
<thead>
<tr>
<th>Code</th>
<th>Code description</th>
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<tbody>
<tr>
<td>MNEC-003</td>
<td>Service is not clinically indicated based on good clinical practice</td>
</tr>
<tr>
<td>MNEC-004</td>
<td>Service is not clinically indicated based on good clinical practice, without additional supporting diagnoses/activities</td>
</tr>
<tr>
<td>CODE-014</td>
<td>Activity/diagnosis is inconsistent with the patient's age/gender</td>
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### Appendices

#### A. References

Botulinum Toxin Indications


B. Revision History

<table>
<thead>
<tr>
<th>Date</th>
<th>Change(s)</th>
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<tbody>
<tr>
<td>1/11/2013</td>
<td>V1.0</td>
</tr>
<tr>
<td>15/07/2014</td>
<td>V1.1: Disclaimer update as per system requirements</td>
</tr>
<tr>
<td>22/08/2016</td>
<td>V2.0: Review</td>
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