

## Medicare Coverage Advisory Committee – Evaluative Questions

<b>1. How well does the evidence address the effectiveness of vertebroplasty for patients with compression fracture as compared to conservative care?</b>		
<i>* 1 – Poorly   * 2   * 3 – Reasonably Well   * 4   * 5 – Very Well</i>		
	Score	
<b>2. How confident are you in the validity of the scientific data on the following outcomes with respect to vertebroplasty for patients with:</b>		
<i>1 – No Confidence   -- 2   -- 3 – Moderate Confidence   -- 4   -- 5 – High Confidence</i>		
	Acute and Sub-acute Compression Fracture	Chronic Compression Fracture
Short-Term Morbidity	Score	Score
Long-Term Morbidity	Score	Score
Mortality	Score	Score
Mobility –Functional Status	Score	Score
Pain Relief	Score	Score
<b>3. How likely is it that vertebroplasty, in the following circumstances, will positively affect the following outcomes when compared to conservative care?</b>		
<i>1 – Not Likely   -- 2   -- 3 – Reasonably Likely   -- 4   -- 5 – Very Likely</i>		
	Acute and Sub-acute Compression Fracture	Chronic Compression Fracture
Short-Term Morbidity	Score	Score
Long-Term Morbidity	Score	Score
Mortality	Score	Score
Mobility –Functional Status	Score	Score
Pain Relief	Score	Score
<b>4. How confident are you that vertebroplasty will produce a clinically important net health benefit for patients with a compression fracture as compared to conservative care for patients with:</b>		
<i>1 – No Confidence   -- 2   -- 3 – Moderate Confidence   -- 4   -- 5 – High Confidence</i>		
	Acute / Sub-acute Compression Fracture	Chronic Compression Fracture
	Score	Score
<b>5. Based on the literature presented, how likely is it that the results of vertebroplasty in the treatment of relief of pain and improvement in ability to function for patients with a compression fracture can be generalized to:</b>		
<i>1 – Not Likely   -- 2   -- 3 – Reasonably Likely   -- 4   -- 5 – Very Likely</i>		
a. The Medicare population (aged 65+):		Score
b. Providers (facilities/physicians) in community practice:		Score

<b>1. How well does the evidence address the effectiveness of kyphoplasty for patients with compression fracture as compared to conservative care?</b>		
* 1 – Poorly    * 2    * 3 – Reasonably Well    * 4    * 5 – Very Well		
		Score
<b>2. How confident are you in the validity of the scientific data on the following outcomes with respect to kyphoplasty for patients with:</b>		
<i>1 – No Confidence    --    2    --    3 – Moderate Confidence    --    4    --    5 – High Confidence</i>		
	Acute and Sub-acute Compression Fracture	Chronic Compression Fracture
Short-Term Morbidity	Score	Score
Long-Term Morbidity	Score	Score
Mortality	Score	Score
Mobility –Functional Status	Score	Score
Pain Relief	Score	Score
<b>3. How likely is it that kyphoplasty, in the following circumstances, will positively affect the following outcomes when compared to conservative care?</b>		
<i>1 – Not Likely    --    2    --    3 – Reasonably Likely    --    4    --    5 – Very Likely</i>		
	Acute and Sub-acute Compression Fracture	Chronic Compression Fracture
Short-Term Morbidity	Score	Score
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Mobility –Functional Status	Score	Score
Pain Relief	Score	Score
<b>4. How confident are you that kyphoplasty will produce a clinically important net health benefit for patients with a compression fracture as compared to conservative care for patients with:</b>		
<i>1 – No Confidence    --    2    --    3 – Moderate Confidence    --    4    --    5 – High Confidence</i>		
Acute / Sub-acute Compression Fracture		Chronic Compression Fracture
Score		Score
<b>5. Based on the literature presented, how likely is it that the results of kyphoplasty in the treatment of relief of pain and improvement in ability to function for patients with a compression fracture can be generalized to:</b>		
<i>1 – Not Likely    --    2    --    3 – Reasonably Likely    --    4    --    5 – Very Likely</i>		
a. The Medicare population (aged 65+):		Score
b. Providers (facilities/physicians) in community practice:		Score

*Glossary:*

**Compression fracture** = a bone break, most often of the vertebral bodies, due to axial loading that disrupts osseous tissue and collapses the affected bone

**Acute and sub-acute compression fracture** = age of fracture must be 6 months or less

**Chronic compression fracture** = age of fracture must be greater than 6 months

**Net health benefit** = balance between risks and benefits including complications of surgery

**Short term morbidity** = illness or abnormal condition affected by the procedure, occurring within 2 years after the surgical procedure

**Long term morbidity** = illness or abnormal condition affected by the procedure, occurring at 2 years or more after the surgical procedure