

<b>*Evolent</b>	
<b>Clinical guideline: 2D – 3D CONFORMAL RADIATION THERAPY (CRT), EXTERNAL BEAM RADIATION THERAPY FOR OTHER CANCERS</b>	<b>Original Date: November 2013</b>
<b>CPT Codes: 77401, 77407, 77412</b>	<b>Last Revised Date: May 2023</b>
<b>Guideline Number: Evolent_CG_225</b>	<b>Implementation Date: January 2024</b>

## GENERAL INFORMATION

- *It is an expectation that all patients receive care/services from a licensed clinician. All appropriate supporting documentation, including recent pertinent office visit notes, laboratory data, and results of any special testing must be provided. If applicable: All prior relevant imaging results and the reason that alternative imaging cannot be performed must be included in the documentation submitted.*
- *Where a specific clinical indication is not directly addressed in this guideline, medical necessity determination will be made based on widely accepted standard of care criteria. These criteria are supported by evidence-based or peer-reviewed sources such as medical literature, societal guidelines and state/national recommendations.*

Most requests for radiation therapy are addressed by Evolent treatment site clinical guidelines. However, there may be requests that are not. For such requests, determinations will be made on a case-by-case basis utilizing the following guidelines (when applicable) but not limited to: National Comprehensive Cancer Network (NCCN),<sup>1</sup> American Society for Radiation Oncology ASTRO (i.e., Model Policies; Evidence-Based Consensus Statement),<sup>2</sup> ACR Appropriateness Criteria,<sup>3</sup> American Society of Clinical Oncology (ASCO)<sup>4</sup> and/or peer reviewed literature.

This guideline for 2D – 3D CRT applies to other cancers not addressed by Evolent treatment site clinical guidelines.

Refer to applicable treatment site-specific guidelines for the management of primary malignancies. Applicable site-specific guidelines may include all or some of the sites below, depending on the specific program.

- Anal Cancer
- Bone Metastases
- Breast Cancer
- Cervical Cancer
- CNS Cancer
- Colon Cancer
- Rectal Cancer
- Endometrial Cancer
- Gastric Cancers
- Head and Neck Cancer
- Lung - Non-Small Cell
- Lung - Small Cell Lung Cancer
- Lymphoma - Hodgkin’s Lymphoma
- Lymphoma - Non-Hodgkin’s Lymphoma
- Pancreas Cancer

- Prostate Cancers

For metastasis to the brain, regardless of primary site, refer to the Evolent clinical guideline for Central Nervous System (CNS). For metastasis to bone, refer to the Evolent clinical guideline for Bone Metastases. For all other metastases, refer to the Evolent clinical guideline for metastatic disease.

### **INDICATIONS FOR 2D – 3D CRT**

### **OTHER CANCER SITES NOT LISTED ABOVE**

- Conventional 2D and 3D-CRT treatment delivery is appropriate for all primary malignancies not listed above.
- The number of fractions for definitive treatment is approvable up to 30 fractions. Fractions beyond 30 will require clinical rationale and will be reviewed on a case-by-case basis.

## REFERENCES

1. NCCN guidelines-Treatment by cancer type. National Comprehensive Cancer Network. Updated 2022. Accessed December 27, 2022. [https://www.nccn.org/guidelines/category\\_1](https://www.nccn.org/guidelines/category_1)
2. ASTRO Model Policies. American Society for Radiation Oncology. Updated 2022. Accessed December 27, 2022. <https://www.astro.org/Daily-Practice/Reimbursement/Model-Policies>
3. ACR Appropriateness Criteria. American College of Radiology. Updated 2022. Accessed December 27, 2022. <https://acsearch.acr.org/list>
4. ASCO guidelines, tools, & resources. American Society of Clinical Oncology. Updated 2022. Accessed December 27, 2022. <https://www.asco.org/practice-patients/guidelines>

**POLICY HISTORY**

<b>Date</b>	<b>Summary</b>
May 2023	Under fractions >30 (other cancer sites) removed “may be approvable upon physician review” and added “will be reviewed on a case-by-case basis”
January 2022	No changes

## Reviewed / Approved by Clinical Guideline Committee

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