

**Rule Category**

AMGL IP

**Ref: No.**

0006

**Version Control**

Version No. 0.2

**Effective Date**

31-03-2023

**Revision Date**

27-04-2023



المظلة هيلثكير مانجمنت  
ALMADALLAH  
HEALTHCARE MANAGEMENT

# Chemotherapy & Immunotherapy

## Guidelines

### Table of content

Definitions	Coverage, Dosage, Complete Chemo Regime Checkpoints, Coding	Side Effects, References
Page 1	Page 2	Page 3

## A. Definitions

### Chemotherapy

Chemotherapy is a cancer treatment where medicine is used to kill cancer cells, there are many different types of chemotherapy medicine, but they all work in a similar way. They stop cancer cells reproducing, which prevents them from growing and spreading in the body.

#### i. Objectives

1. Try to cure the cancer completely (curative chemotherapy)
2. Make other treatments more effective – for example, it can be combined with radiotherapy (chemoradiation) or used before surgery (neo-adjuvant chemotherapy)
3. Reduce the risk of the cancer coming back after radiotherapy or surgery (adjuvant chemotherapy)
4. Relieve symptoms if a cure is not possible (palliative chemotherapy)

#### ii. Types

1. intravenous chemotherapy
2. Oral Chemotherapy (d)

## b. Immunotherapy

Immunotherapy is a treatment that uses a person's own immune system to fight cancer, it can boost or change how the immune system works so it can find and attack cancer cells.

It uses Cytokines, Immunomodulators, Monoclonal Antibodies, Check-point inhibitors, Chimeric antigen receptors, cancer vaccines, oncolytic viruses. (e)

## c. Hormone therapy

Drugs in this category work on different actions of hormones that make some cancers grow. These drugs are used to slow the growth of certain breast, prostate, and endometrial (uterine) cancers, which normally grow in response to natural sex hormones in the body. They work by making the cancer cells unable to use the hormone they need to grow, or by preventing the body from making the hormone.

**Prepared by :**

Dr. Dhavalkumar Modha

**Reviewed by :**

Dr. Ahmed Eldarawi

**Approved by :**

Dr. Islam Zakaria

**Disclaimer**

COPYRIGHT © 2023

Almadallah Healthcare Management

ALL RIGHTS RESERVED.

# Chemotherapy & Immunotherapy

## B. Coverage

Treatment of cancer including surgery, chemotherapy, radiation therapy and immunotherapy are covered under all DHA, HAAD and MOH complied policies.

## C. Dosage

Drug dosages may be expressed as a function of body surface area, body weight, or may be calculated to produce a pharmacokinetically-targeted endpoint (e.g., serum or plasma concentration or area under the curve AUC]). Treatment plans should specify whether absolute (i.e., actual), ideal, or lean body weight is used in calculating drug dosage as a function of body weight. In addition, an equation describing how that value is calculated should appear in the treatment plan if drug dosage is a function of a calculated ideal or lean body weight. If drug dosage is a function of a calculated pharmacokinetic endpoint, the equation(s) describing how that value is calculated should also appear in the treatment plan. (g)(a)

## D. Complete Chemo Regime

**Contiguous treatment days:** Treatment plans should specify the total number of days a drug is administered and the cycle day that treatment commences. Include parenthetically the cycle days on which treatment occurs.

**Non-contiguous days :** Treatment plans should specify the cycle days on which each dose should be given.

**Cycle (or Course) duration** — Treatment cycle duration (or length) should be specified. When a treatment regimen is 21 days in duration, the regimen will be repeated on the twenty-second, forty-third, sixty-fourth..., etc. days following treatment initiation.

**Duration of administration:** Administration duration should be clearly indicated. If a drug is to be administered on more than one day per cycle, each cycle day should be explicitly identified.

**Total dose planned per treatment course** — In all treatment plans (protocols) and drug orders, identify and append parenthetically the total dose (as a function of body weight or surface area) that patients are to receive during a treatment course (or cycle).

**Treatment information should contain the following elements:**

- Total number of cycles
- Infusion days for each cycle
- Drugs and dosage for each infusion days

## E. Checkpoints

- a. Review the complete history of the member and management done from the point member was first diagnosed with Cancer.
- b. Complete plan of chemo regimen should be available and reviewed i.e. total how many cycles of therapy is planned and what is overall cost
- c. Verify the medical necessity and compliance of requested regimen against NCCN guidelines©
- d. Review the dose of each chemo drug to be administered per cycle against the guidelines as per the member's current weight.(g)
- e. Review the remaining annual limit of the member, is whole regime expected to complete within the same policy year and if yes, does member have the ample remaining limit? if not, does member have remaining limit for the current cycle
- f. If Annual Benefit Limit is exhausted - is member eligible for BASMAH
- g. If Member is not eligible for BASMAH, does policy have ex-gratia for cancer treatments.

## F. Coding

### a. ICD 10 CM Guidelines 2018

- i. **Episode of care involves surgical removal of neoplasm** - When an episode of care involves the surgical removal of a neoplasm, primary or secondary site, followed by adjunct chemotherapy or radiation treatment during the same episode of care, the code for the neoplasm should be assigned as principal or first-listed diagnosis.
- ii. **Patient admission/encounter solely for administration of chemotherapy, immunotherapy, and radiation therapy** - assign code Z51.0, Encounter for antineoplastic radiation therapy, or Z51.11, Encounter for antineoplastic chemotherapy, or Z51.12, Encounter for antineoplastic immunotherapy as the first-listed or principal diagnosis. If a patient receives more than one of these therapies during the same admission more than one of these codes may be assigned, in any sequence. The malignancy for which the therapy is being administered should be assigned as a secondary diagnosis.
- iii. **Patient admitted for radiation therapy, chemotherapy or immunotherapy and develops complications** – if patient develops complications such as uncontrolled nausea and vomiting or dehydration, the principal or first-listed diagnosis is Z51.0, or Z51.11, or Z51.12 followed by any codes for the complications. (i)

# Chemotherapy & Immunotherapy

## a. ICD 10 CM Guidelines 2018

Chemotherapy requests are currently being billed as fee for service for all DHA providers given that member is being discharged on the same day.

## c. HAAD providers

Chemotherapy/Immunotherapy request are being billed as daycare with service code 25-01 or 24 along with CPT and Drug codes.

## G. Side Effects

- a. Nausea, Vomiting, Diarrhea are common and immediate side effects of chemotherapy and usually prophylactic drugs for these side effects are included with the infusions.
- b. Anemia, Lethargy, hair loss, dry skin, sore mouth, weight change is also a lasting side effects.
- c. an increased risk of getting infections (d)

## H. References

1. Guidelines for treatment regimens. (n.d.). Retrieved May 2, 2023, from [https://ctep.cancer.gov/protocolDevelopment/policies\\_nomenclature.htm](https://ctep.cancer.gov/protocolDevelopment/policies_nomenclature.htm)
2. Guidelines, tools, & Resources. (n.d.). Retrieved May 2, 2023, from <https://old-prod.asco.org/practice-patients/guidelines>
3. Treatment by cancer type. (n.d.). Retrieved May 2, 2023, from [https://www.nccn.org/guidelines/category\\_1](https://www.nccn.org/guidelines/category_1)
4. (n.d.). Retrieved May 2, 2023, from <https://www.nhs.uk/conditions/chemotherapy/>
5. Side effects of immunotherapy. (n.d.). Retrieved May 2, 2023, from <https://www.cancer.gov/about-cancer/treatment/types/immunotherapy/side-effects>
6. General circular pursuant to the Health Insurance Law (no 11 of ... - ISAHd. (n.d.). Retrieved May 2, 2023, from <https://www.isahd.ae/content/docs/GC%2001-2020.pdf>  
General circular pursuant to the Health Insurance Law (no 11 of ... - ISAHd. (n.d.). Retrieved May 2, 2023, from <https://www.isahd.ae/content/docs/GC%2001-2020.pdf>
7. NCCN chemotherapy order templates. (n.d.). Retrieved May 2, 2023, from [https://www.nccn.org/docs/default-source/clinical/nccn-chemotherapy-templates-user-guide.pdf?sfvrsn=df7373a5\\_2](https://www.nccn.org/docs/default-source/clinical/nccn-chemotherapy-templates-user-guide.pdf?sfvrsn=df7373a5_2)
8. Chemotherapy side effects. (n.d.). Retrieved May 2, 2023, from <https://www.cancer.org/treatment/treatments-and-side-effects/treatment-types/chemotherapy/chemotherapy-side-effects.html>
9. 2018 ICD-10-CM guidelines - centers for Medicare & Medicaid Services. (n.d.). Retrieved May 2, 2023, from <https://www.cms.gov/Medicare/Coding/ICD10/Downloads/2018-ICD-10-CM-Coding-Guidelines.pdf>