



MASSACHUSETTS

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## Medical Policy

# Radioimmunosciintigraphy Imaging (Monoclonal Antibody Imaging) Using In-111 Satumomab Pendetide (OncoScint) or Tc-99m Arcitumomab (IMMU-4, CEA-Scan)

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### Policy Number: 638

BCBSA Reference Number: 6.01.36A

### Related Policies

None

### Policy

#### Commercial Members: Managed Care (HMO and POS), PPO, and Indemnity Medicare HMO Blue<sup>SM</sup> and Medicare PPO Blue<sup>SM</sup> Members

Radioimmunosciintigraphy using satumomab pendetide or arcitumomab as the monoclonal antibody may be **MEDICALLY NECESSARY** in patients with known or suspected recurrent colorectal carcinoma under the following conditions:

- In patients with an elevated carcinoembryonic antigen level, who have no evidence of disease with other imaging modalities (i.e., CT), in whom a second-look laparotomy is under consideration, or
- In patients with an isolated, potentially resectable recurrence identified with conventional imaging modalities (i.e., CT), for whom the detection of additional occult lesions would alter the surgical plan.

Other applications of radioimmunosciintigraphy using In-111 satumomab pendetide (OncoScint) or Tc-99m-arcitumomab (IMMU-4, CEA-Scan) are **INVESTIGATIONAL**, including, but not limited to:

- Ovarian cancer
- Breast cancer
- Medullary thyroid cancer, and
- Lung cancer.

### Prior Authorization Information

Pre-service approval is required for all inpatient services for all products.

See below for situations where prior authorization may be required or may not be required for outpatient services.

Yes indicates that prior authorization is required.  
 No indicates that prior authorization is not required.  
 N/A indicates that this service is primarily performed in an inpatient setting.

	<b>Outpatient</b>
<b>Commercial Managed Care (HMO and POS)</b>	No
<b>Commercial PPO and Indemnity</b>	No
<b>Medicare HMO Blue<sup>SM</sup></b>	No
<b>Medicare PPO Blue<sup>SM</sup></b>	No

### **CPT Codes / HCPCS Codes / ICD-9 Codes**

*The following codes are included below for informational purposes. Inclusion or exclusion of a code does not constitute or imply member coverage or provider reimbursement. Please refer to the member's contract benefits in effect at the time of service to determine coverage or non-coverage as it applies to an individual member.*

*Providers should report all services using the most up-to-date industry-standard procedure, revenue, and diagnosis codes, including modifiers where applicable.*

#### **CPT Codes**

<b>CPT codes:</b>	<b>Code Description</b>
78800	Radiopharmaceutical localization of tumor or distribution of radiopharmaceutical agent(s); limited area
78801	Radiopharmaceutical localization of tumor or distribution of radiopharmaceutical agent(s); multiple areas
78803	Radiopharmaceutical localization of tumor or distribution of radiopharmaceutical agent(s); tomographic (SPECT)
78804	Radiopharmaceutical localization of tumor or distribution of radiopharmaceutical agent(s); whole body, requiring two or more days imaging

#### **HCPCS Codes**

<b>HCPCS codes:</b>	<b>Code Description</b>
A4642	Supply of satumomab pentetide, radiopharmaceutical diagnostic imaging agent, per dose

### **Description**

Radioimmunoscinigraphy (RIS) involves the administration of radiolabeled monoclonal antibodies (MAbs), which are directed against specific molecular targets, followed by imaging with an external gamma camera. MAbs that react with specific cellular antigens are conjugated with a radiolabeled isotope. The labeled antibody-isotope conjugate is then injected into the patient and allowed to localize to the target over a 2- to 7-day period. The patient then undergoes imaging with a nuclear medicine gamma camera, and radioisotope counts are analyzed. Imaging can be performed with planar techniques or by using single-photon emission computed tomography (SPECT).

Examples of RIS agents for imaging of colorectal and ovarian carcinomas include Indium-111 satumomab pentetide (CYT-103, OncoScint CR/OV®) and Technetium-99m arcitumomab (IMMU-4, CEA-Scan®). All RIS agents are considered investigational regardless of the commercial name, the manufacturer or FDA approval status.

These RIS agents have also been used in an off-label use to evaluate other malignancies including, but not limited to, breast cancer, lung cancer, and thyroid cancer.

OncoScint is no longer commercially available.

## Summary

Positive findings on radioimmunoscinigraphy can affect the surgical management of patients with suspected occult cancer who would otherwise undergo second-look laparotomy due to a rising carcinoembryonic antigen level, or resection of a metastasis that was incorrectly assumed to be an isolated lesion. Radioimmunoscinigraphy may be considered medically necessary in these circumstances.

The relatively small size of most studies and/or the retrospective nature of the analyses without prospectively designed confirmation studies limits the conclusions that can be made from the available data on other cancer types. Therefore, radioimmunoscinigraphy is investigational for these cancers.

## Policy History

Date	Action
11/2011-4/2012	Medical policy ICD 10 remediation: Formatting, editing and coding updates. No changes to policy statements.
9/2011	Reviewed - Medical Policy Group - Urology and Obstetrics/Gynecology. No changes to policy statements.
7/2011	Reviewed - Medical Policy Group - Hematology and Oncology. No changes to policy statements.
9/2010	Reviewed - Medical Policy Group - Hematology and Oncology. No changes to policy statements.
6/2010	Reviewed - Medical Policy Group - Urology and Obstetrics/Gynecology. No changes to policy statements.
9/2009	Reviewed - Medical Policy Group - Hematology and Oncology. No changes to policy statements.
6/2009	Reviewed - Medical Policy Group - Urology and Obstetrics/Gynecology. No changes to policy statements.
2/2009	BCBSA National medical policy review. No changes to policy statements.
10/2008	Reviewed - Medical Policy Group - Hematology and Oncology. No changes to policy statements.
6/2008	Reviewed - Medical Policy Group - Urology and Obstetrics/Gynecology. No changes to policy statements.
9/2007	Reviewed - Medical Policy Group - Hematology and Oncology. No changes to policy statements.
6/2007	Reviewed - Medical Policy Group - Urology and Obstetrics/Gynecology. No changes to policy statements.

## Information Pertaining to All Blue Cross Blue Shield Medical Policies

Click on any of the following terms to access the relevant information:

[Medical Policy Terms of Use](#)

[Managed Care Guidelines](#)

[Indemnity/PPO Guidelines](#)

[Clinical Exception Process](#)

[Medical Technology Assessment Guidelines](#)

## References

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