INTENSITY MODULATED RADIATION THERAPY
PRIOR AUTHORIZATION FORM

PreferredOne®

This form must be completed by a person with thorough clinical knowledge of the member's current clinical presentation and his/her clinical evaluation history. **Clinical documentation supporting the medical necessity of this request is required.** For more information, please refer to the medical policy document MC/L009 Intensity Modulated Radiation Therapy (IMRT) located at https://www.preferredone.com/MedicalPolicy/

Please email this form and clinical documentation to Intake@Preferredone.com or fax to (763) 847-4014.

Patient Name	**PreferredOne ID #**	**DOB**
ICD 10 DX	**Procedure Code(s)**	**Ordering Provider Signature**
Date of Service		**Number of Fractions**

Ordering Provider First & Last Name			**NPI #**
Clinic Name			**NPI #**
Address			**City**
Phone	**Fax**	**State**	**Zip**
Servicing Provider First & Last Name			**NPI #**
Address			**City**
Phone	**Fax**	**State**	**Zip**

Dosimetric Treatment Planning comparisons between 3D-CRT and IMRT must be made where indicated

ABDOMINAL CANCER: GASTRIC, GASTROESOPHAGEAL JUNCTION (SIEWART III TUMORS), PANCREAS, HEPATOBILIARY	
Is the disease metastatic? ◯ YES ◯ NO (Not allowable if metastatic)	
3D-CRT Plan	IMRT Plan
Mean dose to liver _____Gy	Mean dose to liver _____Gy (Allowable if 3D-CRT >30 Gy and IMRT ≤25 Gy)
Kidneys: Mean dose to right kidney _____Gy; and Mean dose to left kidney _____Gy; or Mean dose to bilateral kidneys _____Gy	Kidneys: (Allowable if 3D-CRT predicts mean dose of >18 Gy to bilat kidneys and IMRT predicts no more than 90% of one kidney receives > than 18 Gy) Mean dose to right kidney _____Gy % of dose volume _____ Mean dose to left kidney _____Gy % of dose volume _____
Maximum dose to spinal cord _____Gy	Maximum dose to spinal cord _____Gy (Allowable 3D-CRT > 50 Gy and IMRT ≤45 Gy)
Maximum dose to small bowel _____Gy	Maximum dose to small bowel _____Gy (Allowable if 3D-CRT > 54 Gy and IMRT <50 Gy)

ANUS/ANAL CANAL CANCER: (NO FURTHER DATA REQUIRED) [NOTE: USE IN RESECTABLE RECTAL CANCER IS INVESTIGATIVE] ☐

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BREAST CANCER: LEFT BREAST	
(Allowable if 3D-CRT target volume coverage results in cardiac radiation exposure that is ≥ 25 Gy to 10cc or more of the heart despite use of complex positioning device and IMRT shows a reduction of absolute heart volume receiving ≥ 25 Gy by at least 20%)	
3D-CRT Plan	IMRT Plan
Cardiac radiation exposure _____Gy	Cardiac radiation exposure _____Gy (Allowable if target volume coverage <25 Gy to 9cc or <)
Absolute heart volume receiving 25 Gy or > _____	Absolute heart volume receiving 25 Gy or > _____ (Allowable if reduction of at least 20% compared to 3D-CRT)
Complex positioning device used? ◯ YES ◯ NO	Complex positioning device used? ◯ YES ◯ NO

BREAST CANCER: LARGE BREASTS	
3D-CRT Plan	IMRT Plan
Results in hot spots? ◯ YES ◯ NO (defined as dose variation > 10% of target)	Results in hot spots? ◯ YES ◯ NO (Allowable if hot spots are avoidable)

BREAST CANCER: INTERNAL MAMMARY LYMPH NODE

Are any of the following present? (check all that apply)

☐ Radiographically enlarged internal mammary lymph node/s (per CT, MRI, PET/CT, or CXR)
☐ Pathologically involved internal mammary lymph node/s (per aspiration cytology or tissue biopsy pathology)
(Allowable for either of the above)

Number of involved/positive axillary lymph nodes: _____ (Allowable if ≥ 4 involved/positive axillary lymph nodes)

Location:

☐ Superior medial quadrant
☐ Inferior medial quadrant
☐ Superior lateral quadrant
☐ Inferior lateral quadrant

Other (please specify): _____

(Allowable if medial quadrant tumor with ≥1 positive axillary lymph node/s; or medial quadrant T3 tumor)

Tumor Stage:_____

CENTRAL NERVOUS SYSTEM CANCER

Lesion is in close proximity to: (check all that apply) (Allowable for any of the following)

☐ optic nerve ☐ optic lens ☐ retina ☐ optic chiasm ☐ cochlea ☐ brain stem

ESOPHAGEAL CANCER (SIEWERT I AND II TUMORS) WHERE REDUCTION IN DOSE TO ORGANS AT RISK (EG, HEART, LUNGS) IS REQUIRED THAT CANNOT BE ACHIEVED BY 3D-CRT TECHNIQUES (NO FURTHER DATA REQUIRED) ☐

GYNECOLOGIC CANCER (primary, malignant)

Lesion location: (check all that apply) (Allowable for any of the following)

☐ cervix ☐ uterus ☐ vulvar ☐ fallopian tube ☐ ovary

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HEAD AND NECK CANCER

Lesion location: (check all that apply) (Allowable for any of the following)

- ☐ oral cavity
- ☐ lips
- ☐ larynx Tumor Stage:_____ (Allowable for stage III or IV)
- ☐ nasopharynx
- ☐ oropharynx
- ☐ hypopharynx
- ☐ paranasal sinuses and nasal cavity
- ☐ mucosal melanoma
- ☐ salivary glands

LUNG CANCER

Primary lung cancer treatment with concurrent chemotherapy and radiation therapy? ◯YES ◯NO

3D-CRT Plan	IMRT Plan
Maximum spinal cord dose _____Gy Percent of normal lung receiving > 20 Gy (V20)? _____	Maximum spinal cord dose _____Gy Percent of normal lung receiving > 20 Gy (V20)? _____ (Allowable for primary lung cancer where concurrent chemotherapy and radiation is planned; and 3D-CRT plan predicts the maximum spinal cord dose would exceed 50 Gy and IMRT plan predicts maximum spinal cord would be less than or equal to 45 Gy; **or** the % of normal lung receiving > 20 Gy (V20) accounts for > 30% of the normal lung **and** IMRT will reduce the V20 to at least 10% below the 3D-CRT V20; and tumor motion is accounted for)
3D or 4D-Planning CT	
Tumor motion_____ cm Respiratory gating employed, if risk of inadequate coverage? ◯YES ◯NO	

MEDIASTINAL NEOPLASM (IE, LYMPHOMA) (NO FURTHER DATA REQUIRED) ☐

PEDIATRIC RADIOSENSITIVE TUMOR WHEN USED FOR CURATIVE INTENT IN MEMBER WHO IS LESS THAN 21 YEARS OF AGE (eg, EWING SARCOMA, WILMS' TUMOR/NEPHROBLASTOMA): (NO FURTHER DATA REQUIRED) ☐

PELVIC SARCOMA, PRIMARY: (NO FURTHER DATA REQUIRED) ☐

PROSTATE CANCER

Localized? ◯YES ◯NO (Allowable if localized)

Post Prostatectomy dose _____Gy (Allowable for dose escalation ≥ 64 Gy and one of the following exist) (check all that apply)

- ☐ PSA remains detectable at 6 months post surgery
- ☐ PSA is detectable and increases on two or more lab determinations
- ☐ Post-operative stage T3b or T4
- ☐ Post-operative pathology reveals positive surgical margins

RECTAL ADENOCARCINOMA, NON-RESECTABLE: (NO FURTHER DATA REQUIRED) [NOTE: USE IN RESECTABLE RECTAL CANCER IS INVESTIGATIVE] ☐

SPINAL CORD CANCER: (NO FURTHER DATA REQUIRED) ☐

THYROID CANCER, ANAPLASTIC: (NO FURTHER DATA REQUIRED) ☐

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OTHER SITES OF MALIGNANCY	
Site/target of radiation therapy: _____	
3D-CRT Plan	IMRT Plan
Target volume is in close proximity to critical structure and steep dose gradient is needed to avoid damage to critical structure (3D-CRT and IMRT plans must be performed; supporting data must be submitted) ☐	
Same or immediately adjacent area has received previous radiation (no further data is required) ☐	
A decrease in amount of dose inhomogeneity in a large treatment volume is required to avoid excessive normal tissue toxicity (3D-CRT and IMRT plans must be performed; supporting data must be submitted) ☐	
Non-IMRT technique would substantially increase the probability of clinically meaningful toxicity to adjacent normal tissue (3D-CRT and IMRT plans must be performed; supporting data must be submitted) ☐	