

Medical Coverage Policy

Adoptive Immunotherapy

☐ Device/Equipment ☐ Drug ☐ Medical ☐ Surgery ☐ Test ☐ Other			
Effective Date:	3/16/2010	Policy Last Updated:	2/19/2013
☐ Prospective review is recommended/required. Please check the member agreement for preauthorization guidelines.			
□ Prospective review is not required.			

Description:

The spontaneous regression of certain cancers, such as renal cell cancer or melanoma, supports the idea that the patient's immune system is sometimes capable of delaying tumor progression and, on rare occasions, eliminate the tumor altogether. These observations have led to an interest in researching a variety of immunologic therapies designed to stimulate the patient's own immune systems. Adoptive immunotherapy is the transfer of previously sensitized immunologic cells (e.g., cytotoxic T-lymphocytes or lymphocytes producing specific antigens) to the tumor-bearing host.

The major research challenge in adoptive immunotherapy is to develop immune cells with specific anti tumor reactivity that could be generated in large enough quantities that it may be transferred to tumor-bearing patients.

In current trials, these cells are transferred either using adoptive cellular therapy (ACT), or through antigen loaded dendritic cell infusions.

ACT protocols vary, but include these common steps:

- 1. lymphocyte harvesting (either from tumor biopsy or peripheral blood)
- 2. propagation of tumor specific lymphocytes in vitro using various immune modulators
- 3. selection of lymphocytes with reactivity to common tumor antigens with ELISA
- 4. lymphodepletion with immunosuppressive agents
- 5. transfusion of lymphocytes back into the tumor-bearing host

Available scientific research does not support the safety and efficacy of adoptive immunotherapy. Therefore, adoptive immunotherapy is not medically necessary as there is insufficient peer reviewed scientific literature to demonstrate its efficacy.

Medical Criteria:

Not applicable.

Policy

Adoptive immunotherapy is not medically necessary for all products as there is insufficient medical literature to support the efficacy of this treatment.

Coverage:

Benefits may vary between groups and contracts. Please refer to the appropriate Evidence of Coverage, Subscriber Agreement, or Benefit Booklet for applicable not medically necessary benefits/coverage.

Adoptive immunotherapy may be covered in accordance with the New Cancer Therapies Mandate.

Coding:

The following code is not medically necessary: S2107

Also known as:

Not applicable

Related topics:

New Cancer Therapies Mandate

Published:

Provider Update, May 2013 Provider Update, April 2012 Provider Update, April 2011 Provider Update, May 2010

References:

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History:
2/19/13 Annual review
2/7/12 Annual review
2/15/11 Annual review
3/16/10 New policy approved

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