

EFFECTIVE DATE: 08|01|2008

POLICY LAST UPDATED: 06|20|2017

OVERVIEW

Local hyperthermia for treatment of cancer consists of the use of heat to make tumors more susceptible to cancer therapy measures. Whole-body hyperthermia requires the patient to be placed under either general anesthesia or deep sedation.

MEDICAL CRITERIA

Not applicable

PRIOR AUTHORIZATION

Not applicable

POLICY STATEMENT

BlueCHiP for Medicare and Commercial Products

Local hyperthermia therapy may be considered medically necessary when used in combination with radiation therapy for the treatment of patients with primary or metastatic cutaneous or subcutaneous superficial tumors.

Local hyperthermia is considered not medically necessary when used alone or in combination with chemotherapy.

Whole-body hyperthermia therapy is considered not medically necessary as there is insufficient peer-reviewed literature that demonstrates that the procedure is effective.

COVERAGE

Benefits may vary between groups/contracts. Please refer to the appropriate Evidence of Coverage or Subscriber Agreement for the applicable radiation therapy benefits/coverage.

BACKGROUND

Hyperthermia is a type of cancer treatment in which body tissue is exposed to high temperatures (up to 113°F) to damage and kill cancer cells. Hyperthermia can be administered using local and whole-body techniques.

Local hyperthermia entails elevating the temperature of superficial or subcutaneous tumors while sparing surrounding normal tissue, using either external or interstitial modalities. Local hyperthermia therapy may be considered medically necessary when used in combination with radiation therapy for the treatment of patients with primary or metastatic cutaneous or subcutaneous superficial tumors. Local hyperthermia is considered not medically necessary when used alone or in combination with chemotherapy.

Whole-body hyperthermia requires the patient to be placed under either general anesthesia or deep sedation. The patient's body temperature is increased to 108°F by packing the patient in heated (hot water) blankets. The elevated body temperature is maintained for a period of 4 hours, while the essential body functions are closely monitored. Approximately 1 hour is required for a "cooling off" period, after which the patient is constantly observed for a minimum of 12 hours. This modality has been variously termed "systemic thermotherapy" or "whole-body hyperthermia." Whole-body hyperthermia therapy is considered not

medically necessary. There are inadequate data to permit scientific conclusions regarding the use of whole-body hyperthermia as an adjunct to either radiation or chemotherapy, and inadequate data regarding the use of local hyperthermia in conjunction with chemotherapy alone.

CODING

BlueCHiP for Medicare and Commercial Products

The following codes are covered for local hyperthermia if medically necessary:

77600 Hyperthermia, externally generated; superficial (ie, heating to a depth of 4 cm or less)

77610 Hyperthermia generated by interstitial probe(s); 5 or fewer interstitial applicators

77615 Hyperthermia generated by interstitial probe(s); more than 5 interstitial applicators

The following codes are considered not medically necessary as there are inadequate data to permit scientific conclusions regarding its efficacy:

77605 Hyperthermia, externally generated; deep (ie, heating to depths greater than 4 cm)

77620 Hyperthermia generated by intracavitary probe(s)

There is no specific CPT procedure code for whole-body hyperthermia. To report use an unlisted code.

RELATED POLICIES

None

PUBLISHED

Provider Update, September 2017

Provider Update, December 2016

Provider Update, December 2015

Provider Update, January 2015

Provider Update, May 2013

Provider Update, April 2012

Provider Update, July 2011

Provider Update, July 2010

Provider Update, July 2009

REFERENCES

1. National Cancer Institute: Fact Sheet; Hyperthermia in Cancer Treatment: Questions and Answers.
<http://www.cancer.gov/about-cancer/treatment/types/surgery/hyperthermia-fact-sheet>

2. Centers for Medicare and Medicaid Services. Medicare Coverage Database: *NCD for Hyperthermia for Treatment of Cancer (110.1)*.

<https://www.cms.gov/medicare-coverage-database/details/ncd-details.aspx?NCDId=66&ncdver=1&bc=AgAAgAAAAAAAAA%3d%3d&>

3. American Cancer Society: Making Treatment Decisions; Hyperthermia.

<https://www.cancer.org/treatment/treatments-and-side-effects/treatment-types/hyperthermia.html>

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