

Past Radiation Oncology Announcements

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Upcoming Radiation Oncology Solution (RAD) guideline changes for Special Treatment Procedure (CPT 77470) and Special Physics Consult (CPT 77370) – Effective March 2025*

Special Treatment Procedure (CPT 77470)

To better align with Coding Guidance from the American Society for Radiation Oncology (ASTRO), the RAD clinical guidelines for Special Treatment Procedure (CPT 77470) have been updated with more specific clinical scenarios that justify approval.

This reflects ASTRO’s stated intention that “there is no situation in which 77470 may be routinely used.” (2024 Radiation Oncology Coding Resource, ASTRO, Ch. 12: Radiation Treatment Management, p.76). Routine Deep Inspiration Breath Hold (DIBH) has also been removed as an indication.

The following documentation will also be required to support the clinical review of Special Treatment Procedure requests. Providers can upload these required documents at time of case submission using the Attach File feature available in Carelon’s provider portal.

- Documentation outlining the special circumstance that requires additional physician effort and work

Special treatment procedure is indicated when extra planning time and effort is documented for ANY of the following:

- Cytotoxic chemotherapy and/or targeted therapy and/or immunotherapy within 90 days of RT
- Brachytherapy when combined with external radiation therapy
- Proton therapy
- Total body or hemibody radiation
- Pediatric patient requiring daily anesthesia and daily physician supervision during treatment
- Certain cases requiring reconstruction of previous radiation plan, complex planning, and physics input
- Stereotactic body radiation therapy (SBRT) in a complex medical setting (e.g. treating a patient on a ventilator)

- Special treatment procedure is NOT medically necessary for uncomplicated SBRT treatment (such as for a single bone metastasis) Other (documentation of special circumstances or time-consuming plan required)

Special Physics Consult (CPT 77370)

A few guideline criteria have been similarly updated for Special Physics Consult (CPT 77370). As per ASTRO guidance, documentation is necessary for approval.

Special physics consult is indicated when requested by physician for ANY of the following (documentation required):

- Brachytherapy when combined with external beam therapy
- Special brachytherapy equipment customized by a qualified medical physicist for a particular patient
- Fusion of multiple image sets (CT, MRI, PET) when performed by the medical physicist
- Dosimetric analysis of previous radiation field overlapping or abutting current field
- Analysis of dose to a fetus
- Analysis of dose to a pacemaker
- Stereotactic radiosurgery (SRS) or stereotactic body radiation therapy (SBRT) with report of dosimetric parameters and specific organ tolerances met or exceeded
- Other specific physics work not described by another CPT code, at request of radiation oncologist

Required Documentation for Special Physics Consult (CPT 77370):

The following documentation will also be required to support the clinical review of Special Physics Consult requests. Providers can upload these required documents at time of case submission using the Attach File feature available in Carelon's provider portal.

- Physician Treatment Planning Note
- Special Physics Consult Order signed/dated
- Medical Physicist Summary signed/dated by radiation oncologist

(2024 Radiation Oncology Coding Resource, ASTRO, Ch. 9: Medical Radiation Physics, Dosimetry, Treatment Devices and Special Services, p. 64)

The updated criteria for Special Treatment Procedure (CPT 77470) and Special Physics Consult (CPT 77370) will take effect on March 2025.

Questions? Please email RadiationOncologySolutions@carelon.com for any clinical or program questions.

Clinical update: Radiation therapy for benign conditions

Today, Carelon MBM does not have clinical guidelines for the use of radiation therapy to treat benign diseases due to their relative rarity or lack of high-quality evidence. We recognize this area has attracted more attention recently due to the recent edition of the [ASTRO news](#) that profiled treatment for benign conditions such as osteoarthritis and Dupuytren's Contracture (trigger finger).

Carelon MBM is tracking these cases carefully and monitoring the volume of benign requests. If there is a significant rise in requests, we will proceed with our usual evidence-based guideline development process to support future management for these conditions.

In the interim, providers can still submit requests for benign diseases by indicating the diagnosis is “Other”, and manually entering the appropriate ICD 10 code for their patient’s diagnosis. However, since benign diagnoses are out of scope for review, the case will automatically close upon intake with no further action needed.

Documentation upload feature now available for all Radiation Oncology (Rad Onc) cases

Did you know that when submitting a case, the Carelon Medical Benefits Management provider portal will let you know when you need to upload additional documents? Following the guidance throughout the provider portal and answering the clinical questions accurately and completely is the most efficient method of getting your case reviewed as quickly as possible. Carelon has designed the clinical questions in a very deliberate manner, intended to gather only relevant information that will allow us to adjudicate the request appropriately. Limiting clinical document uploads to only those situations where they are needed helps to ensure that only the minimum amount of information necessary to perform a service is requested.

If your case does not get approved right on the provider portal, there is an option to type in relevant clinical information in the Additional Information text box when the case is submitted.

Rad Onc documentation upload feature

When additional clinical documents are requested, you will have an option to upload your documents at case submission, also known as the Attach File feature. It is best practice to identify the pertinent information in the patient’s chart for the requested service, and only upload those specific pages on the portal. When Carelon requests documents, it is always better to upload than to fax. When documents are faxed, there can be delays in the documentation getting attached to the case. We know documentation needs can be confusing, so let the provider portal be your guide.

Viewing radiation therapy CPT codes

For our radiation oncology/therapy program, the list of managed CPT codes can vary by health plan or by line of business (commercial, Medicare, Medicaid). Providers can view the list of included CPT codes and the corresponding category (modality) by using the look-up feature in the provider portal. As a reminder, providers need to request a specific modality (brachytherapy, IMRT, etc.,) and cannot select individual codes. However, if a code is not on the CPT code list, this means AIM is not managing the code and the provider should contact the health plan for more details.

How to access the CPT code list

1. Log in to the provider portal and click the “Help Desk icon from the home page.
2. Select “Radiation Therapy Code Lookup”.
3. Within the view CPT Codes, select the “health plan” name, and “year”.
4. Click “Find”.
5. Use the column headers to sort the list by code, description, or category to view the CPT codes included in the radiation therapy program for that health plan.

Utilize the radiation oncology order request worksheets

The Radiation Oncology Program has comprehensive order request checklists to help providers identify and collect the information in advance to have it available when entering requests using the

Carelon provider portal. We recommend printing a copy or saving it to your computer to keep it handy when you're preparing to submit an order.

The order request checklists and other helpful information can be found under the [Resources section of the microsite](#).