

HEALTH PLAN POLICY	
Policy Title: Genetic Expression Profiling – Breast Cancer	Policy Number: MUM54 Revision: New
Department: Medical Management	Sub-Department: Utilization Management
Applies to Product Lines: <input type="checkbox"/> Medicaid <input checked="" type="checkbox"/> USFHP <input type="checkbox"/> Children’s Health Insurance Plan <input checked="" type="checkbox"/> Commercial Insured <input checked="" type="checkbox"/> Health Insurance Exchange <input type="checkbox"/> Non Insured Business <input checked="" type="checkbox"/> Medicare	
Origination/Effective Date: 10/09/2019	
Reviewed Date(s):	Revision Date(s):

SCOPE:

This policy addresses genetic expression profiling (GEP) for chemotherapeutic management of known selective breast cancers.

DEFINITIONS AND ACRONYMS:

- American Society of Clinical Oncology (ASCO)
- Estrogen Receptor Positive (ER+)
- Genetic Expression Profiling (GEP)
- Human Epidermal Growth Factor Receptor-2 (HER-2)
- National Comprehensive Cancer Network (NCCN) – an alliance of 27 cancer centers.

POLICY:

Medical necessity is established when biopsy proven ER+, HER2 negative malignancies are identified where chemotherapy is an option. Specific histologies and tumor size are required.

RATIONALE:

GEP as a means of guiding chemotherapy decisions for breast cancer management has been extensively studied. This tool is often referred to as oncotyping and, in fact, one of the commercially available assays goes by that name. ASCO has supported this literature driven opinion. NCCN has stated one caveat, that this tool has not been sufficiently studied in those patients over 70 years old.

REFERENCES:

- NCCN 2019 Chemotherapy in Patients Greater than 70 years Old
- ASCO 2017 Breast Biomarkers Oncotyping

RELATED DOCUMENTS:

None

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Chief Executive Officer Health Plans

10/18/19

Date



David Engleking, M.D.
Medical Director

10/15/19

Date

REVISION HISTORY:

Revision	Date	Description of Change	Committee
New	10/09/2019	Initial release.	Executive Leadership