Oral Anticancer Drugs **Policy Number:** M-0038
Revision: 1 **Last Update: 6/5/2014**

Payment will not be made for any use of these drugs outside of the criteria without prior authorization. The member may not be billed unless the member explicitly agrees in writing to be responsible for the charges in accordance with the contract/provider manual. Prior authorization will only be given if the provider demonstrates the intended use meets Medicare coverage guidelines.

Oral Anticancer Drugs that are addressed in this policy are:

- Myleran® (Busulfan)
- Xeloda® (Capecitabine)
- Cytoxan® (Cyclophosphamide)
- Vepesid® (Etoposide)
- Oforta® (Fludarabine phosphate)
- Alkeran® (Melphalan)
- Methotrexate
- Temodar® (Temozolomide)
- Hycamtin® (Topotecan)

Coverage Guidelines:

CMS Benefits Policy Manual (IOM 100-02), Chapter 15, Section 50. - Drugs and Biologicals
Social Security Act, Sec. 1861(s)(Q)

In March 2010, a revised medical policy on Oral Anticancer Drugs was published with an effective date of June 1, 2010. That policy revision defined the ICD-9 diagnosis codes for which each drug would be covered. The policy was revised to be consistent with Medicare's national coverage policy for Off-Label Use of Drugs and Biologicals in an Anti-Cancer Chemotherapeutic Regimen. That policy is found in the Medicare Benefit Policy Manual, (Internet-only Publication 100-02), Chapter 15, Section 50.4.5: www.cms.gov/Manuals/IOM/list.asp

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That policy states that off-label indications are covered in two general situations:

1. The use is (a) supported in any of the following four compendia:
    - National Comprehensive Cancer Network (NCCN) Drugs and Biologics Compendium – Categories 1 or 2A
    - American Hospital Formulary Service – Drug Information
    - Thomson Micromedex DrugDex – Class I, IIa or IIb
    - Clinical Pharmacology

    And (b) not listed as unsupported/not medically accepted in any of the compendia (e.g., Category 3 in NCCN or Class III in DrugDex).

2. The Medicare contractor makes a determination based on its analysis of the published literature from one or more of the 26 journals listed in that section.

Policy Requirements:
Claims for codes J8498 or J8597 must identify the name of the drug, the manufacturer, and the dosage strength of each tablet/suppository/etc. Only quantities of these drugs which meet the coverage criteria listed in the related Policy Article may be billed using these codes. The claim must also indicate which oral anticancer drug is being used and the prescribed frequency of administration of the anticancer drug. This information should be entered in the narrative field of an electronic claim.

Claims using code J8999 must include the name of the drug, the manufacturer, the NDC number, the dosage strength of each tablet/suppository/etc., and the number of tablets or capsules dispensed.

Limitations:
For any item to be covered by Medicare, it must 1) be eligible for a defined Medicare benefit category, 2) be reasonable and necessary for the diagnosis or treatment of illness or injury or to improve the functioning of a malformed body member, and 3) meet all other applicable Medicare statutory and regulatory requirements. For the items addressed in this medical policy,

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the criteria for reasonable and necessary are defined by the following indications and limitations of coverage and/or medical necessity.

Statutory coverage criteria for oral anticancer drugs are specified in the related Policy Article. In addition, the drug must be reasonable and necessary for the individual patient. If the statutory coverage criteria are met but the drug is not reasonable and necessary for the individual patient it will be denied as not medically necessary.

Drugs may be covered only if dispensed and billed to Medicare by the entity that actually dispenses the drug to the Medicare beneficiary, and that entity must be permitted under all applicable federal, state, and local laws and regulations to dispense drugs. Only entities licensed in the state where they are physically located may bill the DME MAC for oral anticancer and oral antiemetic drugs. Physicians may bill the DME MAC for drugs if all of the following conditions are met: the physician is 1) enrolled as a DMEPOS supplier with the National Supplier Clearinghouse, and 2) dispensing the drug(s) to the Medicare beneficiary, and 3) authorized by the state to dispense drugs as part of the physician's license. Claims submitted by entities not licensed to dispense drugs will be denied for lack of medical necessity.

If the drug on the claim is denied as not medically necessary, the related supply fee will also be denied as not medically necessary.

Coding Information:

CPT/HCPCS Code(s)

A9270	Non-Covered item or service
J8498	Antiemetic drug, rectal/suppository, not otherwise specified
J8510	Busulfan; oral, 2mg
J8520	Capecitabine, oral, 150mg
J8521	Capecitabine, oral, 500mg

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J8530	Cyclophosphamide, oral, 25mg
J8560	Etoposide, oral, 50mg
J8562	Fludarabine phosphate, oral, 10mg
J8597	Antiemetic drug, oral, not otherwise specified
J8600	Melphalan, oral, 2mg
J8610	Methotrexate, oral, 2.5mg
J8700	Temozolomide, oral, 5mg
J8705	Topotecan, oral, 0.25mg
J8999	Prescription drug, oral, chemotherapeutic, NOS
Q0511	Pharmacy supply fee for oral anti-cancer, oral anti-emetic or immunosuppressive drug(s); for the first prescription in a 30-day period
Q0512	Pharmacy supply fee for oral anti-cancer, oral anti-emetic or immunosuppressive drug(s); for a subsequent prescription in a 30-day period

ICD-9 Code(s):

For Busulfan (J8510):

183.0 - 183.9	MALIGNANT NEOPLASM OF OVARY - MALIGNANT NEOPLASM OF UTERINE ADNEXA UNSPECIFIED SITE
200.00 - 200.88	RETICULOSARCOMA UNSPECIFIED SITE - OTHER NAMED VARIANTS OF LYMPHOSARCOMA AND RETICULOSARCOMA INVOLVING LYMPH NODES OF MULTIPLE SITES
202.00 - 202.92	NODULAR LYMPHOMA UNSPECIFIED SITE - OTHER AND UNSPECIFIED MALIGNANT NEOPLASMS OF LYMPHOID AND HISTIOCYTIC TISSUE INVOLVING INTRATHORACIC

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	LYMPH NODES
203.00 - 203.82	MULTIPLE MYELOMA, WITHOUT MENTION OF HAVING ACHIEVED REMISSION - OTHER IMMUNOPROLIFERATIVE NEOPLASMS, IN RELAPSE
205.00 - 205.92	ACUTE MYELOID LEUKEMIA, WITHOUT MENTION OF HAVING ACHIEVED REMISSION - UNSPECIFIED MYELOID LEUKEMIA, IN RELAPSE
206.00 - 206.92	ACUTE MONOCYTIC LEUKEMIA, WITHOUT MENTION OF HAVING ACHIEVED REMISSION - UNSPECIFIED MONOCYTIC LEUKEMIA, IN RELAPSE
V10.43	PERSONAL HISTORY OF MALIGNANT NEOPLASM OF OVARY
V10.62	PERSONAL HISTORY OF MYELOID LEUKEMIA
V10.63	PERSONAL HISTORY OF MONOCYTIC LEUKEMIA
V10.71	PERSONAL HISTORY OF LYMPHOSARCOMA AND RETICULOSARCOMA
V10.79	PERSONAL HISTORY OF OTHER LYMPHATIC AND HEMATOPOIETIC NEOPLASMS
V42.81	BONE MARROW REPLACED BY TRANSPLANT

For Capecitabine (J8520, J8521):

140.0 - 141.9	MALIGNANT NEOPLASM OF UPPER LIP VERMILION BORDER - MALIGNANT NEOPLASM OF TONGUE UNSPECIFIED
143.0 - 149.9	MALIGNANT NEOPLASM OF UPPER GUM - MALIGNANT NEOPLASM OF ILL-DEFINED SITES WITHIN THE LIP AND ORAL CAVITY
150.0 - 150.9	MALIGNANT NEOPLASM OF CERVICAL ESOPHAGUS - MALIGNANT NEOPLASM OF ESOPHAGUS UNSPECIFIED SITE
151.0 - 151.9	MALIGNANT NEOPLASM OF CARDIA - MALIGNANT NEOPLASM OF STOMACH

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	UNSPECIFIED SITE
152.0 - 152.2	MALIGNANT NEOPLASM OF DUODENUM - MALIGNANT NEOPLASM OF ILEUM
152.8	MALIGNANT NEOPLASM OF OTHER SPECIFIED SITES OF SMALL INTESTINE
152.9	MALIGNANT NEOPLASM OF SMALL INTESTINE UNSPECIFIED SITE
153.0 - 154.8	MALIGNANT NEOPLASM OF HEPATIC FLEXURE - MALIGNANT NEOPLASM OF OTHER SITES OF RECTUM RECTOSIGMOID JUNCTION AND ANUS
155.1	MALIGNANT NEOPLASM OF INTRAHEPATIC BILE DUCTS
156.0 - 156.9	MALIGNANT NEOPLASM OF GALLBLADDER - MALIGNANT NEOPLASM OF BILIARY TRACT PART UNSPECIFIED SITE
157.0 - 157.9	MALIGNANT NEOPLASM OF HEAD OF PANCREAS - MALIGNANT NEOPLASM OF PANCREAS PART UNSPECIFIED
158.8	MALIGNANT NEOPLASM OF SPECIFIED PARTS OF PERITONEUM
158.9	MALIGNANT NEOPLASM OF PERITONEUM UNSPECIFIED
174.0 - 175.9	MALIGNANT NEOPLASM OF NIPPLE AND AREOLA OF FEMALE BREAST - MALIGNANT NEOPLASM OF OTHER AND UNSPECIFIED SITES OF MALE BREAST
183.0 - 183.9	MALIGNANT NEOPLASM OF OVARY - MALIGNANT NEOPLASM OF UTERINE ADNEXA UNSPECIFIED SITE
187.1 - 187.4	MALIGNANT NEOPLASM OF PREPUCE - MALIGNANT NEOPLASM OF PENIS PART UNSPECIFIED
187.8	MALIGNANT NEOPLASM OF OTHER SPECIFIED SITES OF MALE GENITAL ORGANS
187.9	MALIGNANT NEOPLASM OF MALE GENITAL ORGAN SITE UNSPECIFIED
189.0	MALIGNANT NEOPLASM OF KIDNEY EXCEPT PELVIS

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189.1	MALIGNANT NEOPLASM OF RENAL PELVIS
197.0	SECONDARY MALIGNANT NEOPLASM OF LUNG
197.6	SECONDARY MALIGNANT NEOPLASM OF RETROPERITONEUM AND PERITONEUM
197.7	MALIGNANT NEOPLASM OF LIVER SECONDARY
198.3	SECONDARY MALIGNANT NEOPLASM OF BRAIN AND SPINAL CORD
198.5	SECONDARY MALIGNANT NEOPLASM OF BONE AND BONE MARROW
199.0	DISSEMINATED MALIGNANT NEOPLASM
199.1	OTHER MALIGNANT NEOPLASM OF UNSPECIFIED SITE
235.2	NEOPLASM OF UNCERTAIN BEHAVIOR OF STOMACH INTESTINES AND RECTUM
235.5	NEOPLASM OF UNCERTAIN BEHAVIOR OF OTHER AND UNSPECIFIED DIGESTIVE ORGANS
251.1	OTHER SPECIFIED HYPOGLYCEMIA
251.4	ABNORMALITY OF SECRETION OF GLUCAGON
251.8	OTHER SPECIFIED DISORDERS OF PANCREATIC INTERNAL SECRETION
V10.00 - V10.09	PERSONAL HISTORY OF MALIGNANT NEOPLASM OF UNSPECIFIED SITE IN GASTROINTESTINAL TRACT - PERSONAL HISTORY OF MALIGNANT NEOPLASM OF OTHER SITES IN GASTROINTESTINAL TRACT
V10.3	PERSONAL HISTORY OF MALIGNANT NEOPLASM OF BREAST
V10.43	PERSONAL HISTORY OF MALIGNANT NEOPLASM OF OVARY
V10.52	PERSONAL HISTORY OF MALIGNANT NEOPLASM OF KIDNEY
V10.88	PERSONAL HISTORY OF MALIGNANT NEOPLASM OF OTHER ENDOCRINE GLANDS

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	AND RELATED STRUCTURES

For Cyclophosphamide (J8530):

140.0 - 149.9	MALIGNANT NEOPLASM OF UPPER LIP VERMILION BORDER - MALIGNANT NEOPLASM OF ILL-DEFINED SITES WITHIN THE LIP AND ORAL CAVITY
151.0 - 151.9	MALIGNANT NEOPLASM OF CARDIA - MALIGNANT NEOPLASM OF STOMACH UNSPECIFIED SITE
158.8	MALIGNANT NEOPLASM OF SPECIFIED PARTS OF PERITONEUM
158.9	MALIGNANT NEOPLASM OF PERITONEUM UNSPECIFIED
160.0 - 161.9	MALIGNANT NEOPLASM OF NASAL CAVITIES - MALIGNANT NEOPLASM OF LARYNX UNSPECIFIED
162.0 - 162.9	MALIGNANT NEOPLASM OF TRACHEA - MALIGNANT NEOPLASM OF BRONCHUS AND LUNG UNSPECIFIED
164.0	MALIGNANT NEOPLASM OF THYMUS
164.8	MALIGNANT NEOPLASM OF OTHER PARTS OF MEDIASTINUM
170.0 - 170.9	MALIGNANT NEOPLASM OF BONES OF SKULL AND FACE EXCEPT MANDIBLE - MALIGNANT NEOPLASM OF BONE AND ARTICULAR CARTILAGE SITE UNSPECIFIED
171.0 - 171.9	MALIGNANT NEOPLASM OF CONNECTIVE AND OTHER SOFT TISSUE OF HEAD FACE AND NECK - MALIGNANT NEOPLASM OF CONNECTIVE AND OTHER SOFT TISSUE SITE UNSPECIFIED
173.10 - 173.99	UNSPECIFIED MALIGNANT NEOPLASM OF EYELID, INCLUDING CANTHUS - OTHER SPECIFIED MALIGNANT NEOPLASM OF SKIN, SITE UNSPECIFIED

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174.0 - 175.9	MALIGNANT NEOPLASM OF NIPPLE AND AREOLA OF FEMALE BREAST - MALIGNANT NEOPLASM OF OTHER AND UNSPECIFIED SITES OF MALE BREAST
180.0 - 180.9	MALIGNANT NEOPLASM OF ENDOCERVIX - MALIGNANT NEOPLASM OF CERVIX UTERI UNSPECIFIED SITE
181	MALIGNANT NEOPLASM OF PLACENTA
182.0 - 182.8	MALIGNANT NEOPLASM OF CORPUS UTERI EXCEPT ISTHMUS - MALIGNANT NEOPLASM OF OTHER SPECIFIED SITES OF BODY OF UTERUS
183.0 - 183.9	MALIGNANT NEOPLASM OF OVARY - MALIGNANT NEOPLASM OF UTERINE ADNEXA UNSPECIFIED SITE
185	MALIGNANT NEOPLASM OF PROSTATE
186.0 - 186.9	MALIGNANT NEOPLASM OF UNDESCENDED TESTIS - MALIGNANT NEOPLASM OF OTHER AND UNSPECIFIED TESTIS
188.0 - 188.9	MALIGNANT NEOPLASM OF TRIGONE OF URINARY BLADDER - MALIGNANT NEOPLASM OF BLADDER PART UNSPECIFIED
189.0 - 189.1	MALIGNANT NEOPLASM OF KIDNEY EXCEPT PELVIS - MALIGNANT NEOPLASM OF RENAL PELVIS
190.5	MALIGNANT NEOPLASM OF RETINA
191.0 - 191.9	MALIGNANT NEOPLASM OF CEREBRUM EXCEPT LOBES AND VENTRICLES - MALIGNANT NEOPLASM OF BRAIN UNSPECIFIED SITE
192.8	MALIGNANT NEOPLASM OF OTHER SPECIFIED SITES OF NERVOUS SYSTEM
194.0	MALIGNANT NEOPLASM OF ADRENAL GLAND
195.0	MALIGNANT NEOPLASM OF HEAD FACE AND NECK
197.0	SECONDARY MALIGNANT NEOPLASM OF LUNG

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197.7	MALIGNANT NEOPLASM OF LIVER SECONDARY
198.3	SECONDARY MALIGNANT NEOPLASM OF BRAIN AND SPINAL CORD
198.5	SECONDARY MALIGNANT NEOPLASM OF BONE AND BONE MARROW
198.7	SECONDARY MALIGNANT NEOPLASM OF ADRENAL GLAND
200.00 - 200.88	RETICULOSARCOMA UNSPECIFIED SITE - OTHER NAMED VARIANTS OF LYMPHOSARCOMA AND RETICULOSARCOMA INVOLVING LYMPH NODES OF MULTIPLE SITES
201.00 - 201.98	HODGKIN'S PARAGRANULOMA UNSPECIFIED SITE - HODGKIN'S DISEASE UNSPECIFIED TYPE INVOLVING LYMPH NODES OF MULTIPLE SITES
202.00 - 202.98	NODULAR LYMPHOMA UNSPECIFIED SITE - OTHER AND UNSPECIFIED MALIGNANT NEOPLASMS OF LYMPHOID AND HISTIOCYTIC TISSUE INVOLVING LYMPH NODES OF MULTIPLE SITES
203.00 - 203.82	MULTIPLE MYELOMA, WITHOUT MENTION OF HAVING ACHIEVED REMISSION - OTHER IMMUNOPROLIFERATIVE NEOPLASMS, IN RELAPSE
204.00 - 204.92	ACUTE LYMPHOID LEUKEMIA, WITHOUT MENTION OF HAVING ACHIEVED REMISSION - UNSPECIFIED LYMPHOID LEUKEMIA, IN RELAPSE
205.00 - 205.92	ACUTE MYELOID LEUKEMIA, WITHOUT MENTION OF HAVING ACHIEVED REMISSION - UNSPECIFIED MYELOID LEUKEMIA, IN RELAPSE
206.00 - 206.92	ACUTE MONOCYTIC LEUKEMIA, WITHOUT MENTION OF HAVING ACHIEVED REMISSION - UNSPECIFIED MONOCYTIC LEUKEMIA, IN RELAPSE
209.30 - 209.36	MALIGNANT POORLY DIFFERENTIATED NEUROENDOCRINE CARCINOMA, ANY SITE - MERKEL CELL CARCINOMA OF OTHER SITES
209.75	SECONDARY MERKEL CELL CARCINOMA
211.1	BENIGN NEOPLASM OF STOMACH

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212.6	BENIGN NEOPLASM OF THYMUS
219.0	BENIGN NEOPLASM OF CERVIX UTERI
236.1	NEOPLASM OF UNCERTAIN BEHAVIOR OF PLACENTA
238.6	NEOPLASM OF UNCERTAIN BEHAVIOR OF PLASMA CELLS
238.77	POST-TRANSPLANT LYMPHOPROLIFERATIVE DISORDER (PTLD)
239.2	NEOPLASM OF UNSPECIFIED NATURE OF BONE SOFT TISSUE AND SKIN
273.2	OTHER PARAPROTEINEMIAS
273.3	MACROGLOBULINEMIA
277.30	AMYLOIDOSIS, UNSPECIFIED
998.9	UNSPECIFIED COMPLICATION OF PROCEDURE NOT ELSEWHERE CLASSIFIED
V10.01	PERSONAL HISTORY OF MALIGNANT NEOPLASM OF TONGUE
V10.02	PERSONAL HISTORY OF MALIGNANT NEOPLASM OF OTHER AND UNSPECIFIED PARTS OF ORAL CAVITY AND PHARYNX
V10.04	PERSONAL HISTORY OF MALIGNANT NEOPLASM OF STOMACH
V10.11	PERSONAL HISTORY OF MALIGNANT NEOPLASM OF BRONCHUS AND LUNG
V10.3	PERSONAL HISTORY OF MALIGNANT NEOPLASM OF BREAST
V10.40 - V10.48	PERSONAL HISTORY OF MALIGNANT NEOPLASM OF UNSPECIFIED FEMALE GENITAL ORGAN - PERSONAL HISTORY OF MALIGNANT NEOPLASM OF EPIDIDYMIS
V10.51 - V10.53	PERSONAL HISTORY OF MALIGNANT NEOPLASM OF BLADDER - PERSONAL HISTORY OF MALIGNANT NEOPLASM OF RENAL PELVIS
V10.61	PERSONAL HISTORY OF LYMPHOID LEUKEMIA

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V10.62	PERSONAL HISTORY OF MYELOID LEUKEMIA
V10.63	PERSONAL HISTORY OF MONOCYTIC LEUKEMIA
V10.71	PERSONAL HISTORY OF LYMPHOSARCOMA AND RETICULOSARCOMA
V10.72	PERSONAL HISTORY OF HODGKIN'S DISEASE
V10.79	PERSONAL HISTORY OF OTHER LYMPHATIC AND HEMATOPOIETIC NEOPLASMS
V10.81	PERSONAL HISTORY OF MALIGNANT NEOPLASM OF BONE
V10.83	PERSONAL HISTORY OF OTHER MALIGNANT NEOPLASM OF SKIN
V10.84	PERSONAL HISTORY OF MALIGNANT NEOPLASM OF EYE
V10.85	PERSONAL HISTORY OF MALIGNANT NEOPLASM OF BRAIN
V10.88	PERSONAL HISTORY OF MALIGNANT NEOPLASM OF OTHER ENDOCRINE GLANDS AND RELATED STRUCTURES
V10.89	PERSONAL HISTORY OF MALIGNANT NEOPLASM OF OTHER SITES
V10.91	PERSONAL HISTORY OF MALIGNANT NEUROENDOCRINE TUMOR
V42.81	BONE MARROW REPLACED BY TRANSPLANT

For Etoposide (J8560):

150.0 - 150.9	MALIGNANT NEOPLASM OF CERVICAL ESOPHAGUS - MALIGNANT NEOPLASM OF ESOPHAGUS UNSPECIFIED SITE
151.0 - 151.9	MALIGNANT NEOPLASM OF CARDIA - MALIGNANT NEOPLASM OF STOMACH UNSPECIFIED SITE
155.0 - 155.2	MALIGNANT NEOPLASM OF LIVER PRIMARY - MALIGNANT NEOPLASM OF LIVER

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	NOT SPECIFIED AS PRIMARY OR SECONDARY
157.4	MALIGNANT NEOPLASM OF ISLETS OF LANGERHANS
158.8 - 158.9	MALIGNANT NEOPLASM OF SPECIFIED PARTS OF PERITONEUM - MALIGNANT NEOPLASM OF PERITONEUM UNSPECIFIED
160.0 - 160.9	MALIGNANT NEOPLASM OF NASAL CAVITIES - MALIGNANT NEOPLASM OF ACCESSORY SINUS UNSPECIFIED
162.0 - 162.9	MALIGNANT NEOPLASM OF TRACHEA - MALIGNANT NEOPLASM OF BRONCHUS AND LUNG UNSPECIFIED
163.0 - 163.9	MALIGNANT NEOPLASM OF PARIETAL PLEURA - MALIGNANT NEOPLASM OF PLEURA UNSPECIFIED
164.0	MALIGNANT NEOPLASM OF THYMUS
164.1 - 164.9	MALIGNANT NEOPLASM OF HEART - MALIGNANT NEOPLASM OF MEDIASTINUM PART UNSPECIFIED
165.8	MALIGNANT NEOPLASM OF OTHER SITES WITHIN THE RESPIRATORY SYSTEM AND INTRATHORACIC ORGANS
170.0 - 170.9	MALIGNANT NEOPLASM OF BONES OF SKULL AND FACE EXCEPT MANDIBLE - MALIGNANT NEOPLASM OF BONE AND ARTICULAR CARTILAGE SITE UNSPECIFIED
171.0 - 171.9	MALIGNANT NEOPLASM OF CONNECTIVE AND OTHER SOFT TISSUE OF HEAD FACE AND NECK - MALIGNANT NEOPLASM OF CONNECTIVE AND OTHER SOFT TISSUE SITE UNSPECIFIED
174.0 - 175.9	MALIGNANT NEOPLASM OF NIPPLE AND AREOLA OF FEMALE BREAST - MALIGNANT NEOPLASM OF OTHER AND UNSPECIFIED SITES OF MALE BREAST
176.0 - 176.9	KAPOSI'S SARCOMA SKIN - KAPOSI'S SARCOMA UNSPECIFIED SITE
180.0 - 180.9	MALIGNANT NEOPLASM OF ENDOCERVIX - MALIGNANT NEOPLASM OF CERVIX

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	UTERI UNSPECIFIED SITE
181	MALIGNANT NEOPLASM OF PLACENTA

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182.0 - 182.8	MALIGNANT NEOPLASM OF CORPUS UTERI EXCEPT ISTHMUS - MALIGNANT NEOPLASM OF OTHER SPECIFIED SITES OF BODY OF UTERUS
183.0 - 183.9	MALIGNANT NEOPLASM OF OVARY - MALIGNANT NEOPLASM OF UTERINE ADNEXA UNSPECIFIED SITE
184.4	MALIGNANT NEOPLASM OF VULVA UNSPECIFIED SITE
185	MALIGNANT NEOPLASM OF PROSTATE
186.0 - 186.9	MALIGNANT NEOPLASM OF UNDESCENDED TESTIS - MALIGNANT NEOPLASM OF OTHER AND UNSPECIFIED TESTIS
188.0 - 188.9	MALIGNANT NEOPLASM OF TRIGONE OF URINARY BLADDER - MALIGNANT NEOPLASM OF BLADDER PART UNSPECIFIED
189.0 - 189.1	MALIGNANT NEOPLASM OF KIDNEY EXCEPT PELVIS - MALIGNANT NEOPLASM OF RENAL PELVIS
190.5	MALIGNANT NEOPLASM OF RETINA
191.0 - 191.9	MALIGNANT NEOPLASM OF CEREBRUM EXCEPT LOBES AND VENTRICLES - MALIGNANT NEOPLASM OF BRAIN UNSPECIFIED SITE
192.8	MALIGNANT NEOPLASM OF OTHER SPECIFIED SITES OF NERVOUS SYSTEM
193	MALIGNANT NEOPLASM OF THYROID GLAND
194.0	MALIGNANT NEOPLASM OF ADRENAL GLAND
197.0	SECONDARY MALIGNANT NEOPLASM OF LUNG
197.7	MALIGNANT NEOPLASM OF LIVER SECONDARY
198.3	SECONDARY MALIGNANT NEOPLASM OF BRAIN AND SPINAL CORD
198.4	SECONDARY MALIGNANT NEOPLASM OF OTHER PARTS OF NERVOUS SYSTEM

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198.5	SECONDARY MALIGNANT NEOPLASM OF BONE AND BONE MARROW
198.7	SECONDARY MALIGNANT NEOPLASM OF ADRENAL GLAND
199.0 - 199.2	DISSEMINATED MALIGNANT NEOPLASM - MALIGNANT NEOPLASM ASSOCIATED WITH TRANSPLANT ORGAN
200.00 - 200.88	RETICULOSARCOMA UNSPECIFIED SITE - OTHER NAMED VARIANTS OF LYMPHOSARCOMA AND RETICULOSARCOMA INVOLVING LYMPH NODES OF MULTIPLE SITES
201.00 - 201.98	HODGKIN'S PARAGRANULOMA UNSPECIFIED SITE - HODGKIN'S DISEASE UNSPECIFIED TYPE INVOLVING LYMPH NODES OF MULTIPLE SITES
202.00 - 202.98	NODULAR LYMPHOMA UNSPECIFIED SITE - OTHER AND UNSPECIFIED MALIGNANT NEOPLASMS OF LYMPHOID AND HISTIOCYTIC TISSUE INVOLVING LYMPH NODES OF MULTIPLE SITES
203.00 - 203.82	MULTIPLE MYELOMA, WITHOUT MENTION OF HAVING ACHIEVED REMISSION - OTHER IMMUNOPROLIFERATIVE NEOPLASMS, IN RELAPSE
204.00 - 204.92	ACUTE LYMPHOID LEUKEMIA, WITHOUT MENTION OF HAVING ACHIEVED REMISSION - UNSPECIFIED LYMPHOID LEUKEMIA, IN RELAPSE
205.00 - 205.02	ACUTE MYELOID LEUKEMIA, WITHOUT MENTION OF HAVING ACHIEVED REMISSION - ACUTE MYELOID LEUKEMIA, IN RELAPSE
205.20 - 205.22	SUBACUTE MYELOID LEUKEMIA, WITHOUT MENTION OF HAVING ACHIEVED REMISSION - SUBACUTE MYELOID LEUKEMIA, IN RELAPSE
206.00 - 206.02	ACUTE MONOCYTIC LEUKEMIA, WITHOUT MENTION OF HAVING ACHIEVED REMISSION - ACUTE MONOCYTIC LEUKEMIA, IN RELAPSE
206.20 - 206.22	SUBACUTE MONOCYTIC LEUKEMIA, WITHOUT MENTION OF HAVING ACHIEVED REMISSION - SUBACUTE MONOCYTIC LEUKEMIA, IN RELAPSE
209.21	MALIGNANT CARCINOID TUMOR OF THE BRONCHUS AND LUNG

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209.30	MALIGNANT POORLY DIFFERENTIATED NEUROENDOCRINE CARCINOMA, ANY SITE
209.31 - 209.36	MERKEL CELL CARCINOMA OF THE FACE - MERKEL CELL CARCINOMA OF OTHER SITES
209.75	SECONDARY MERKEL CELL CARCINOMA
212.6	BENIGN NEOPLASM OF THYMUS
235.2	NEOPLASM OF UNCERTAIN BEHAVIOR OF STOMACH INTESTINES AND RECTUM
235.5	NEOPLASM OF UNCERTAIN BEHAVIOR OF OTHER AND UNSPECIFIED DIGESTIVE ORGANS
236.1	NEOPLASM OF UNCERTAIN BEHAVIOR OF PLACENTA
237.5	NEOPLASM OF UNCERTAIN BEHAVIOR OF BRAIN AND SPINAL CORD
238.6	NEOPLASM OF UNCERTAIN BEHAVIOR OF PLASMA CELLS
238.77	POST-TRANSPLANT LYMPHOPROLIFERATIVE DISORDER (PTLD)
V10.00	PERSONAL HISTORY OF MALIGNANT NEOPLASM OF UNSPECIFIED SITE IN GASTROINTESTINAL TRACT
V10.03	PERSONAL HISTORY OF MALIGNANT NEOPLASM OF ESOPHAGUS
V10.04	PERSONAL HISTORY OF MALIGNANT NEOPLASM OF STOMACH
V10.07	PERSONAL HISTORY OF MALIGNANT NEOPLASM OF LIVER
V10.11	PERSONAL HISTORY OF MALIGNANT NEOPLASM OF BRONCHUS AND LUNG
V10.3	PERSONAL HISTORY OF MALIGNANT NEOPLASM OF BREAST
V10.40 - V10.44	PERSONAL HISTORY OF MALIGNANT NEOPLASM OF UNSPECIFIED FEMALE GENITAL ORGAN - PERSONAL HISTORY OF MALIGNANT NEOPLASM OF OTHER FEMALE

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	GENITAL ORGANS
V10.46	PERSONAL HISTORY OF MALIGNANT NEOPLASM OF PROSTATE
V10.47	PERSONAL HISTORY OF MALIGNANT NEOPLASM OF TESTIS
V10.51 - V10.53	PERSONAL HISTORY OF MALIGNANT NEOPLASM OF BLADDER - PERSONAL HISTORY OF MALIGNANT NEOPLASM OF RENAL PELVIS
V10.63	PERSONAL HISTORY OF MONOCYTIC LEUKEMIA
V10.71	PERSONAL HISTORY OF LYMPHOSARCOMA AND RETICULOSARCOMA
V10.72	PERSONAL HISTORY OF HODGKIN'S DISEASE
V10.79	PERSONAL HISTORY OF OTHER LYMPHATIC AND HEMATOPOIETIC NEOPLASMS
V10.81	PERSONAL HISTORY OF MALIGNANT NEOPLASM OF BONE
V10.84	PERSONAL HISTORY OF MALIGNANT NEOPLASM OF EYE
V10.85	PERSONAL HISTORY OF MALIGNANT NEOPLASM OF BRAIN
V10.87	PERSONAL HISTORY OF MALIGNANT NEOPLASM OF THYROID
V10.88	PERSONAL HISTORY OF MALIGNANT NEOPLASM OF OTHER ENDOCRINE GLANDS AND RELATED STRUCTURES
V10.89	PERSONAL HISTORY OF MALIGNANT NEOPLASM OF OTHER SITES
V10.91	PERSONAL HISTORY OF MALIGNANT NEUROENDOCRINE TUMOR
V42.81	BONE MARROW REPLACED BY TRANSPLANT

For Fludarabine phosphate (J8562):

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200.00 - 200.88	RETICULOSARCOMA UNSPECIFIED SITE - OTHER NAMED VARIANTS OF LYMPHOSARCOMA AND RETICULOSARCOMA INVOLVING LYMPH NODES OF MULTIPLE SITES
201.00 - 201.98	HODGKIN'S PARAGRANULOMA UNSPECIFIED SITE - HODGKIN'S DISEASE UNSPECIFIED TYPE INVOLVING LYMPH NODES OF MULTIPLE SITES
202.00 - 202.98	NODULAR LYMPHOMA UNSPECIFIED SITE - OTHER AND UNSPECIFIED MALIGNANT NEOPLASMS OF LYMPHOID AND HISTIOCYTIC TISSUE INVOLVING LYMPH NODES OF MULTIPLE SITES
204.10 - 204.12	CHRONIC LYMPHOID LEUKEMIA, WITHOUT MENTION OF HAVING ACHIEVED REMISSION - CHRONIC LYMPHOID LEUKEMIA, IN RELAPSE
204.80	OTHER LYMPHOID LEUKEMIA, WITHOUT MENTION OF HAVING ACHIEVED REMISSION
204.82	OTHER LYMPHOID LEUKEMIA, IN RELAPSE
204.90 - 204.92	UNSPECIFIED LYMPHOID LEUKEMIA, WITHOUT MENTION OF HAVING ACHIEVED REMISSION - UNSPECIFIED LYMPHOID LEUKEMIA, IN RELAPSE
205.00 - 205.02	ACUTE MYELOID LEUKEMIA, WITHOUT MENTION OF HAVING ACHIEVED REMISSION - ACUTE MYELOID LEUKEMIA, IN RELAPSE
205.20 - 205.22	SUBACUTE MYELOID LEUKEMIA, WITHOUT MENTION OF HAVING ACHIEVED REMISSION - SUBACUTE MYELOID LEUKEMIA, IN RELAPSE
206.00 - 206.02	ACUTE MONOCYTIC LEUKEMIA, WITHOUT MENTION OF HAVING ACHIEVED REMISSION - ACUTE MONOCYTIC LEUKEMIA, IN RELAPSE
206.20 - 206.22	SUBACUTE MONOCYTIC LEUKEMIA, WITHOUT MENTION OF HAVING ACHIEVED REMISSION - SUBACUTE MONOCYTIC LEUKEMIA, IN RELAPSE
273.3	MACROGLOBULINEMIA
V10.61 - V10.63	PERSONAL HISTORY OF LYMPHOID LEUKEMIA - PERSONAL HISTORY OF

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	MONOCYTIC LEUKEMIA
V10.71	PERSONAL HISTORY OF LYMPHOSARCOMA AND RETICULOSARCOMA
V10.72	PERSONAL HISTORY OF HODGKIN'S DISEASE
V10.79	PERSONAL HISTORY OF OTHER LYMPHATIC AND HEMATOPOIETIC NEOPLASMS
V42.81	BONE MARROW REPLACED BY TRANSPLANT

For Melphalan (J8600):

150.0 - 159.9	MALIGNANT NEOPLASM OF CERVICAL ESOPHAGUS - MALIGNANT NEOPLASM OF ILL-DEFINED SITES WITHIN THE DIGESTIVE ORGANS AND PERITONEUM
170.0 - 170.9	MALIGNANT NEOPLASM OF BONES OF SKULL AND FACE EXCEPT MANDIBLE - MALIGNANT NEOPLASM OF BONE AND ARTICULAR CARTILAGE SITE UNSPECIFIED
171.0 - 171.9	MALIGNANT NEOPLASM OF CONNECTIVE AND OTHER SOFT TISSUE OF HEAD FACE AND NECK - MALIGNANT NEOPLASM OF CONNECTIVE AND OTHER SOFT TISSUE SITE UNSPECIFIED
172.0 - 172.9	MALIGNANT MELANOMA OF SKIN OF LIP - MELANOMA OF SKIN SITE UNSPECIFIED
174.0 - 175.9	MALIGNANT NEOPLASM OF NIPPLE AND AREOLA OF FEMALE BREAST - MALIGNANT NEOPLASM OF OTHER AND UNSPECIFIED SITES OF MALE BREAST
182.0 - 182.8	MALIGNANT NEOPLASM OF CORPUS UTERI EXCEPT ISTHMUS - MALIGNANT NEOPLASM OF OTHER SPECIFIED SITES OF BODY OF UTERUS
183.0 - 183.9	MALIGNANT NEOPLASM OF OVARY - MALIGNANT NEOPLASM OF UTERINE ADNEXA UNSPECIFIED SITE
185	MALIGNANT NEOPLASM OF PROSTATE

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186.0 - 186.9	MALIGNANT NEOPLASM OF UNDESCENDED TESTIS - MALIGNANT NEOPLASM OF OTHER AND UNSPECIFIED TESTIS
198.5	SECONDARY MALIGNANT NEOPLASM OF BONE AND BONE MARROW
199.0	DISSEMINATED MALIGNANT NEOPLASM
199.1	OTHER MALIGNANT NEOPLASM OF UNSPECIFIED SITE
201.00 - 201.98	HODGKIN'S PARAGRANULOMA UNSPECIFIED SITE - HODGKIN'S DISEASE UNSPECIFIED TYPE INVOLVING LYMPH NODES OF MULTIPLE SITES
203.00 - 203.82	MULTIPLE MYELOMA, WITHOUT MENTION OF HAVING ACHIEVED REMISSION - OTHER IMMUNOPROLIFERATIVE NEOPLASMS, IN RELAPSE
205.10 - 205.12	CHRONIC MYELOID LEUKEMIA, WITHOUT MENTION OF HAVING ACHIEVED REMISSION - CHRONIC MYELOID LEUKEMIA, IN RELAPSE
206.10 - 206.12	CHRONIC MONOCYTIC LEUKEMIA, WITHOUT MENTION OF HAVING ACHIEVED REMISSION - CHRONIC MONOCYTIC LEUKEMIA, IN RELAPSE
238.6	NEOPLASM OF UNCERTAIN BEHAVIOR OF PLASMA CELLS
273.3	MACROGLOBULINEMIA
277.30	AMYLOIDOSIS, UNSPECIFIED
V10.03 - V10.09	PERSONAL HISTORY OF MALIGNANT NEOPLASM OF ESOPHAGUS - PERSONAL HISTORY OF MALIGNANT NEOPLASM OF OTHER SITES IN GASTROINTESTINAL TRACT
V10.3	PERSONAL HISTORY OF MALIGNANT NEOPLASM OF BREAST
V10.42	PERSONAL HISTORY OF MALIGNANT NEOPLASM OF OTHER PARTS OF UTERUS
V10.43	PERSONAL HISTORY OF MALIGNANT NEOPLASM OF OVARY

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V10.46	PERSONAL HISTORY OF MALIGNANT NEOPLASM OF PROSTATE
V10.47	PERSONAL HISTORY OF MALIGNANT NEOPLASM OF TESTIS
V10.62	PERSONAL HISTORY OF MYELOID LEUKEMIA
V10.63	PERSONAL HISTORY OF MONOCYTIC LEUKEMIA
V10.72	PERSONAL HISTORY OF HODGKIN'S DISEASE
V10.79	PERSONAL HISTORY OF OTHER LYMPHATIC AND HEMATOPOIETIC NEOPLASMS
V10.81	PERSONAL HISTORY OF MALIGNANT NEOPLASM OF BONE
V10.82	PERSONAL HISTORY OF MALIGNANT MELANOMA OF SKIN
V42.81	BONE MARROW REPLACED BY TRANSPLANT

For Methotrexate (J8610):

140.0 - 149.9	MALIGNANT NEOPLASM OF UPPER LIP VERMILION BORDER - MALIGNANT NEOPLASM OF ILL-DEFINED SITES WITHIN THE LIP AND ORAL CAVITY
150.0 - 150.9	MALIGNANT NEOPLASM OF CERVICAL ESOPHAGUS - MALIGNANT NEOPLASM OF ESOPHAGUS UNSPECIFIED SITE
151.0 - 151.9	MALIGNANT NEOPLASM OF CARDIA - MALIGNANT NEOPLASM OF STOMACH UNSPECIFIED SITE
153.0 - 154.8	MALIGNANT NEOPLASM OF HEPATIC FLEXURE - MALIGNANT NEOPLASM OF OTHER SITES OF RECTUM RECTOSIGMOID JUNCTION AND ANUS
155.0 - 155.2	MALIGNANT NEOPLASM OF LIVER PRIMARY - MALIGNANT NEOPLASM OF LIVER NOT SPECIFIED AS PRIMARY OR SECONDARY
157.0 - 157.9	MALIGNANT NEOPLASM OF HEAD OF PANCREAS - MALIGNANT NEOPLASM OF

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	PANCREAS PART UNSPECIFIED
158.8 - 158.9	MALIGNANT NEOPLASM OF SPECIFIED PARTS OF PERITONEUM - MALIGNANT NEOPLASM OF PERITONEUM UNSPECIFIED
160.0 - 161.9	MALIGNANT NEOPLASM OF NASAL CAVITIES - MALIGNANT NEOPLASM OF LARYNX UNSPECIFIED
162.0 - 162.9	MALIGNANT NEOPLASM OF TRACHEA - MALIGNANT NEOPLASM OF BRONCHUS AND LUNG UNSPECIFIED
163.0 - 163.9	MALIGNANT NEOPLASM OF PARIETAL PLEURA - MALIGNANT NEOPLASM OF PLEURA UNSPECIFIED
164.1 - 164.9	MALIGNANT NEOPLASM OF HEART - MALIGNANT NEOPLASM OF MEDIASTINUM PART UNSPECIFIED
165.8	MALIGNANT NEOPLASM OF OTHER SITES WITHIN THE RESPIRATORY SYSTEM AND INTRATHORACIC ORGANS
170.0 - 170.9	MALIGNANT NEOPLASM OF BONES OF SKULL AND FACE EXCEPT MANDIBLE - MALIGNANT NEOPLASM OF BONE AND ARTICULAR CARTILAGE SITE UNSPECIFIED
171.0 - 171.9	MALIGNANT NEOPLASM OF CONNECTIVE AND OTHER SOFT TISSUE OF HEAD FACE AND NECK - MALIGNANT NEOPLASM OF CONNECTIVE AND OTHER SOFT TISSUE SITE UNSPECIFIED
173.00	UNSPECIFIED MALIGNANT NEOPLASM OF SKIN OF LIP
173.01	BASAL CELL CARCINOMA OF SKIN OF LIP
173.02	SQUAMOUS CELL CARCINOMA OF SKIN OF LIP
173.09	OTHER SPECIFIED MALIGNANT NEOPLASM OF SKIN OF LIP
174.0 - 175.9	MALIGNANT NEOPLASM OF NIPPLE AND AREOLA OF FEMALE BREAST - MALIGNANT NEOPLASM OF OTHER AND UNSPECIFIED SITES OF MALE BREAST

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180.0 - 180.9	MALIGNANT NEOPLASM OF ENDOCERVIX - MALIGNANT NEOPLASM OF CERVIX UTERI UNSPECIFIED SITE
181	MALIGNANT NEOPLASM OF PLACENTA
183.0 - 183.9	MALIGNANT NEOPLASM OF OVARY - MALIGNANT NEOPLASM OF UTERINE ADNEXA UNSPECIFIED SITE
185	MALIGNANT NEOPLASM OF PROSTATE
186.0 - 186.9	MALIGNANT NEOPLASM OF UNDESCENDED TESTIS - MALIGNANT NEOPLASM OF OTHER AND UNSPECIFIED TESTIS
187.1 - 187.4	MALIGNANT NEOPLASM OF PREPUCE - MALIGNANT NEOPLASM OF PENIS PART UNSPECIFIED
187.8	MALIGNANT NEOPLASM OF OTHER SPECIFIED SITES OF MALE GENITAL ORGANS
187.9	MALIGNANT NEOPLASM OF MALE GENITAL ORGAN SITE UNSPECIFIED
188.0 - 188.9	MALIGNANT NEOPLASM OF TRIGONE OF URINARY BLADDER - MALIGNANT NEOPLASM OF BLADDER PART UNSPECIFIED
189.1 - 189.8	MALIGNANT NEOPLASM OF RENAL PELVIS - MALIGNANT NEOPLASM OF OTHER SPECIFIED SITES OF URINARY ORGANS
190.0	MALIGNANT NEOPLASM OF EYEBALL EXCEPT CONJUNCTIVA CORNEA RETINA AND CHOROID
190.5	MALIGNANT NEOPLASM OF RETINA
190.8	MALIGNANT NEOPLASM OF OTHER SPECIFIED SITES OF EYE
191.0 - 191.9	MALIGNANT NEOPLASM OF CEREBRUM EXCEPT LOBES AND VENTRICLES - MALIGNANT NEOPLASM OF BRAIN UNSPECIFIED SITE
195.0	MALIGNANT NEOPLASM OF HEAD FACE AND NECK

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196.0	SECONDARY AND UNSPECIFIED MALIGNANT NEOPLASM OF LYMPH NODES OF HEAD FACE AND NECK
198.3	SECONDARY MALIGNANT NEOPLASM OF BRAIN AND SPINAL CORD
198.4 - 198.5	SECONDARY MALIGNANT NEOPLASM OF OTHER PARTS OF NERVOUS SYSTEM - SECONDARY MALIGNANT NEOPLASM OF BONE AND BONE MARROW
198.89	SECONDARY MALIGNANT NEOPLASM OF OTHER SPECIFIED SITES
200.00 - 202.98	RETICULOSARCOMA UNSPECIFIED SITE - OTHER AND UNSPECIFIED MALIGNANT NEOPLASMS OF LYMPHOID AND HISTIOCYTIC TISSUE INVOLVING LYMPH NODES OF MULTIPLE SITES
204.00 - 204.92	ACUTE LYMPHOID LEUKEMIA, WITHOUT MENTION OF HAVING ACHIEVED REMISSION - UNSPECIFIED LYMPHOID LEUKEMIA, IN RELAPSE
205.00 - 205.92	ACUTE MYELOID LEUKEMIA, WITHOUT MENTION OF HAVING ACHIEVED REMISSION - UNSPECIFIED MYELOID LEUKEMIA, IN RELAPSE
206.00 - 206.92	ACUTE MONOCYTIC LEUKEMIA, WITHOUT MENTION OF HAVING ACHIEVED REMISSION - UNSPECIFIED MONOCYTIC LEUKEMIA, IN RELAPSE
233.7	CARCINOMA IN SITU OF BLADDER
235.1	NEOPLASM OF UNCERTAIN BEHAVIOR OF LIP ORAL CAVITY AND PHARYNX
235.6	NEOPLASM OF UNCERTAIN BEHAVIOR OF LARYNX
236.1	NEOPLASM OF UNCERTAIN BEHAVIOR OF PLACENTA
238.1	NEOPLASM OF UNCERTAIN BEHAVIOR OF CONNECTIVE AND OTHER SOFT TISSUE
V10.00 - V10.09	PERSONAL HISTORY OF MALIGNANT NEOPLASM OF UNSPECIFIED SITE IN GASTROINTESTINAL TRACT - PERSONAL HISTORY OF MALIGNANT NEOPLASM OF OTHER SITES IN GASTROINTESTINAL TRACT

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V10.11	PERSONAL HISTORY OF MALIGNANT NEOPLASM OF BRONCHUS AND LUNG
V10.21	PERSONAL HISTORY OF MALIGNANT NEOPLASM OF LARYNX
V10.22	PERSONAL HISTORY OF MALIGNANT NEOPLASM OF NASAL CAVITIES MIDDLE EAR AND ACCESSORY SINUSES
V10.3	PERSONAL HISTORY OF MALIGNANT NEOPLASM OF BREAST
V10.41	PERSONAL HISTORY OF MALIGNANT NEOPLASM OF CERVIX UTERI
V10.43	PERSONAL HISTORY OF MALIGNANT NEOPLASM OF OVARY
V10.47	PERSONAL HISTORY OF MALIGNANT NEOPLASM OF TESTIS
V10.49	PERSONAL HISTORY OF MALIGNANT NEOPLASM OF OTHER MALE GENITAL ORGANS
V10.50 - V10.59	PERSONAL HISTORY OF MALIGNANT NEOPLASM OF UNSPECIFIED URINARY ORGAN - PERSONAL HISTORY OF MALIGNANT NEOPLASM OF OTHER URINARY ORGANS
V10.61 - V10.63	PERSONAL HISTORY OF LYMPHOID LEUKEMIA - PERSONAL HISTORY OF MONOCYTIC LEUKEMIA
V10.71	PERSONAL HISTORY OF LYMPHOSARCOMA AND RETICULOSARCOMA
V10.72	PERSONAL HISTORY OF HODGKIN'S DISEASE
V10.79	PERSONAL HISTORY OF OTHER LYMPHATIC AND HEMATOPOIETIC NEOPLASMS
V10.81	PERSONAL HISTORY OF MALIGNANT NEOPLASM OF BONE
V10.85	PERSONAL HISTORY OF MALIGNANT NEOPLASM OF BRAIN
V10.88	PERSONAL HISTORY OF MALIGNANT NEOPLASM OF OTHER ENDOCRINE GLANDS AND RELATED STRUCTURES
V10.89	PERSONAL HISTORY OF MALIGNANT NEOPLASM OF OTHER SITES

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For Temozolomide (J8700):

157.0	MALIGNANT NEOPLASM OF HEAD OF PANCREAS
157.2	MALIGNANT NEOPLASM OF TAIL OF PANCREAS
157.4	MALIGNANT NEOPLASM OF ISLETS OF LANGERHANS
157.9	MALIGNANT NEOPLASM OF PANCREAS PART UNSPECIFIED
158.0 - 158.9	MALIGNANT NEOPLASM OF RETROPERITONEUM - MALIGNANT NEOPLASM OF PERITONEUM UNSPECIFIED
162.0 - 162.9	MALIGNANT NEOPLASM OF TRACHEA - MALIGNANT NEOPLASM OF BRONCHUS AND LUNG UNSPECIFIED
170.0 - 170.9	MALIGNANT NEOPLASM OF BONES OF SKULL AND FACE EXCEPT MANDIBLE - MALIGNANT NEOPLASM OF BONE AND ARTICULAR CARTILAGE SITE UNSPECIFIED
171.0 - 171.9	MALIGNANT NEOPLASM OF CONNECTIVE AND OTHER SOFT TISSUE OF HEAD FACE AND NECK - MALIGNANT NEOPLASM OF CONNECTIVE AND OTHER SOFT TISSUE SITE UNSPECIFIED
172.0 - 172.9	MALIGNANT MELANOMA OF SKIN OF LIP - MELANOMA OF SKIN SITE UNSPECIFIED
179	MALIGNANT NEOPLASM OF UTERUS-PART UNS
180.0	MALIGNANT NEOPLASM OF ENDOCERVIX
182.0	MALIGNANT NEOPLASM OF CORPUS UTERI EXCEPT ISTHMUS
182.1	MALIGNANT NEOPLASM OF ISTHMUS
182.8	MALIGNANT NEOPLASM OF OTHER SPECIFIED SITES OF BODY OF UTERUS
191.0 - 191.9	MALIGNANT NEOPLASM OF CEREBRUM EXCEPT LOBES AND VENTRICLES - MALIGNANT NEOPLASM OF BRAIN UNSPECIFIED SITE

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192.8	MALIGNANT NEOPLASM OF OTHER SPECIFIED SITES OF NERVOUS SYSTEM
192.9	MALIGNANT NEOPLASM OF NERVOUS SYSTEM PART UNSPECIFIED
197.0	SECONDARY MALIGNANT NEOPLASM OF LUNG
197.7	MALIGNANT NEOPLASM OF LIVER SECONDARY
198.3	SECONDARY MALIGNANT NEOPLASM OF BRAIN AND SPINAL CORD
198.5	SECONDARY MALIGNANT NEOPLASM OF BONE AND BONE MARROW
199.0	DISSEMINATED MALIGNANT NEOPLASM
199.1	OTHER MALIGNANT NEOPLASM OF UNSPECIFIED SITE
200.50 - 200.51	PRIMARY CENTRAL NERVOUS SYSTEM LYMPHOMA, UNSPECIFIED SITE, EXTRANODAL AND SOLID ORGAN SITES - PRIMARY CENTRAL NERVOUS SYSTEM LYMPHOMA, LYMPH NODES OF HEAD, FACE, AND NECK
202.10	MYCOSIS FUNGOIDES UNSPECIFIED SITE
202.18	MYCOSIS FUNGOIDES INVOLVING LYMPH NODES OF MULTIPLE SITES
202.20	SEZARY'S DISEASE UNSPECIFIED SITE
202.28	SEZARY'S DISEASE INVOLVING LYMPH NODES OF MULTIPLE SITES
204.00 - 204.02	ACUTE LYMPHOID LEUKEMIA, WITHOUT MENTION OF HAVING ACHIEVED REMISSION - ACUTE LYMPHOID LEUKEMIA, IN RELAPSE
204.20 - 204.22	SUBACUTE LYMPHOID LEUKEMIA, WITHOUT MENTION OF HAVING ACHIEVED REMISSION - SUBACUTE LYMPHOID LEUKEMIA, IN RELAPSE
205.00 - 205.02	ACUTE MYELOID LEUKEMIA, WITHOUT MENTION OF HAVING ACHIEVED REMISSION - ACUTE MYELOID LEUKEMIA, IN RELAPSE

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205.20 - 205.22	SUBACUTE MYELOID LEUKEMIA, WITHOUT MENTION OF HAVING ACHIEVED REMISSION - SUBACUTE MYELOID LEUKEMIA, IN RELAPSE
206.00 - 206.02	ACUTE MONOCYTIC LEUKEMIA, WITHOUT MENTION OF HAVING ACHIEVED REMISSION - ACUTE MONOCYTIC LEUKEMIA, IN RELAPSE
206.20 - 206.22	SUBACUTE MONOCYTIC LEUKEMIA, WITHOUT MENTION OF HAVING ACHIEVED REMISSION - SUBACUTE MONOCYTIC LEUKEMIA, IN RELAPSE
209.21	MALIGNANT CARCINOID TUMOR OF THE BRONCHUS AND LUNG
235.5	NEOPLASM OF UNCERTAIN BEHAVIOR OF OTHER AND UNSPECIFIED DIGESTIVE ORGANS
237.5	NEOPLASM OF UNCERTAIN BEHAVIOR OF BRAIN AND SPINAL CORD
239.2	NEOPLASM OF UNSPECIFIED NATURE OF BONE SOFT TISSUE AND SKIN
251.1	OTHER SPECIFIED HYPOGLYCEMIA
251.4	ABNORMALITY OF SECRETION OF GLUCAGON
251.8	OTHER SPECIFIED DISORDERS OF PANCREATIC INTERNAL SECRETION
V10.09	PERSONAL HISTORY OF MALIGNANT NEOPLASM OF OTHER SITES IN GASTROINTESTINAL TRACT
V10.11	PERSONAL HISTORY OF MALIGNANT NEOPLASM OF BRONCHUS AND LUNG
V10.61	PERSONAL HISTORY OF LYMPHOID LEUKEMIA
V10.62	PERSONAL HISTORY OF MYELOID LEUKEMIA
V10.63	PERSONAL HISTORY OF MONOCYTIC LEUKEMIA
V10.81	PERSONAL HISTORY OF MALIGNANT NEOPLASM OF BONE

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V10.82	PERSONAL HISTORY OF MALIGNANT MELANOMA OF SKIN
V10.85	PERSONAL HISTORY OF MALIGNANT NEOPLASM OF BRAIN
V10.88	PERSONAL HISTORY OF MALIGNANT NEOPLASM OF OTHER ENDOCRINE GLANDS AND RELATED STRUCTURES
V10.89	PERSONAL HISTORY OF MALIGNANT NEOPLASM OF OTHER SITES
V16.49	FAMILY HISTORY OF MALIGNANT NEOPLASM OF OTHER

For Topotecan (J8705):

153.0 - 154.8	MALIGNANT NEOPLASM OF HEPATIC FLEXURE - MALIGNANT NEOPLASM OF OTHER SITES OF RECTUM RECTOSIGMOID JUNCTION AND ANUS
158.8	MALIGNANT NEOPLASM OF SPECIFIED PARTS OF PERITONEUM
158.9	MALIGNANT NEOPLASM OF SPECIFIED PARTS OF PERITONEUM
162.0 - 162.9	MALIGNANT NEOPLASM OF TRACHEA - MALIGNANT NEOPLASM OF BRONCHUS AND LUNG UNSPECIFIED
170.0 - 171.9	MALIGNANT NEOPLASM OF BONES OF SKULL AND FACE EXCEPT MANDIBLE - MALIGNANT NEOPLASM OF CONNECTIVE AND OTHER SOFT TISSUE SITE UNSPECIFIED
174.0 - 175.9	MALIGNANT NEOPLASM OF NIPPLE AND AREOLA OF FEMALE BREAST - MALIGNANT NEOPLASM OF OTHER AND UNSPECIFIED SITES OF MALE BREAST
180.0 - 180.9	MALIGNANT NEOPLASM OF ENDOCERVIX - MALIGNANT NEOPLASM OF CERVIX UTERI UNSPECIFIED SITE
182.0 - 182.8	MALIGNANT NEOPLASM OF CORPUS UTERI EXCEPT ISTHMUS - MALIGNANT NEOPLASM OF OTHER SPECIFIED SITES OF BODY OF UTERUS

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183.0 - 183.9	MALIGNANT NEOPLASM OF OVARY - MALIGNANT NEOPLASM OF UTERINE ADNEXA UNSPECIFIED SITE
185	MALIGNANT NEOPLASM OF PROSTATE
188.0 - 188.9	MALIGNANT NEOPLASM OF TRIGONE OF URINARY BLADDER - MALIGNANT NEOPLASM OF BLADDER PART UNSPECIFIED
189.0 - 189.2	MALIGNANT NEOPLASM OF KIDNEY EXCEPT PELVIS - MALIGNANT NEOPLASM OF URETER
191.0 - 191.9	MALIGNANT NEOPLASM OF CEREBRUM EXCEPT LOBES AND VENTRICLES - MALIGNANT NEOPLASM OF BRAIN UNSPECIFIED SITE
197.0	SECONDARY MALIGNANT NEOPLASM OF LUNG
197.7	MALIGNANT NEOPLASM OF LIVER SECONDARY
198.3	SECONDARY MALIGNANT NEOPLASM OF BRAIN AND SPINAL CORD
198.4	SECONDARY MALIGNANT NEOPLASM OF OTHER PARTS OF NERVOUS SYSTEM
198.5	SECONDARY MALIGNANT NEOPLASM OF BONE AND BONE MARROW
198.7	SECONDARY MALIGNANT NEOPLASM OF ADRENAL GLAND
200.50 - 200.51	PRIMARY CENTRAL NERVOUS SYSTEM LYMPHOMA, UNSPECIFIED SITE, EXTRANODAL AND SOLID ORGAN SITES - PRIMARY CENTRAL NERVOUS SYSTEM LYMPHOMA, LYMPH NODES OF HEAD, FACE, AND NECK
203.00 - 203.82	MULTIPLE MYELOMA, WITHOUT MENTION OF HAVING ACHIEVED REMISSION - OTHER IMMUNOPROLIFERATIVE NEOPLASMS, IN RELAPSE
204.00 - 205.92	ACUTE LYMPHOID LEUKEMIA, WITHOUT MENTION OF HAVING ACHIEVED REMISSION - UNSPECIFIED MYELOID LEUKEMIA, IN RELAPSE
206.00 - 206.02	ACUTE MONOCYTIC LEUKEMIA, WITHOUT MENTION OF HAVING ACHIEVED

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	REMISSION - ACUTE MONOCYTIC LEUKEMIA, IN RELAPSE
206.20 - 206.22	SUBACUTE MONOCYTIC LEUKEMIA, WITHOUT MENTION OF HAVING ACHIEVED REMISSION - SUBACUTE MONOCYTIC LEUKEMIA, IN RELAPSE
209.30	MALIGNANT POORLY DIFFERENTIATED NEUROENDOCRINE CARCINOMA, ANY SITE
209.31 - 209.36	MERKEL CELL CARCINOMA OF THE FACE - MERKEL CELL CARCINOMA OF OTHER SITES
209.75	SECONDARY MERKEL CELL CARCINOMA
238.71 - 238.76	ESSENTIAL THROMBOCYTHEMIA - MYELOFIBROSIS WITH MYELOID METAPLASIA
238.9	NEOPLASM OF UNCERTAIN BEHAVIOR SITE UNSPECIFIED
V10.05 - V10.06	PERSONAL HISTORY OF MALIGNANT NEOPLASM OF LARGE INTESTINE - PERSONAL HISTORY OF MALIGNANT NEOPLASM OF RECTUM RECTOSIGMOID JUNCTION AND ANUS
V10.11	PERSONAL HISTORY OF MALIGNANT NEOPLASM OF BRONCHUS AND LUNG
V10.3	PERSONAL HISTORY OF MALIGNANT NEOPLASM OF BREAST
V10.41 - V10.43	PERSONAL HISTORY OF MALIGNANT NEOPLASM OF CERVIX UTERI - PERSONAL HISTORY OF MALIGNANT NEOPLASM OF OVARY
V10.51	PERSONAL HISTORY OF MALIGNANT NEOPLASM OF BLADDER
V10.61	PERSONAL HISTORY OF LYMPHOID LEUKEMIA
V10.62	PERSONAL HISTORY OF MYELOID LEUKEMIA
V10.63	PERSONAL HISTORY OF MONOCYTIC LEUKEMIA
V10.81	PERSONAL HISTORY OF MALIGNANT NEOPLASM OF BONE
V10.85	PERSONAL HISTORY OF MALIGNANT NEOPLASM OF BRAIN

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V10.89	PERSONAL HISTORY OF MALIGNANT NEOPLASM OF OTHER SITES
V10.91	PERSONAL HISTORY OF MALIGNANT NEUROENDOCRINE TUMOR
V16.49	FAMILY HISTORY OF MALIGNANT NEOPLASM OF OTHER

Background:

Cancer is the result of cells that rapidly over divide. Moreover, these cells can cause a simple benign tumor or they can result in a very serious life threatening disease. Anticancer drugs are designed to kill the rapidly proliferating cells and eliminate the disease. Oral anticancer medications allow the patient an alternative route of administration other than intravenous administration.

Black Box Warning:

Busulfan Warning

MYLERAN is a potent drug. It should not be used unless a diagnosis of chronic myelogenous leukemia has been adequately established and the responsible physician is knowledgeable in assessing response to chemotherapy.

MYLERAN can induce severe bone marrow hypoplasia. Reduce or discontinue the dosage immediately at the first sign of any unusual depression of bone marrow function as reflected by an abnormal decrease in any of the formed elements of the blood. A bone marrow examination should be performed if the bone marrow status is uncertain.

Capecitabine Warning

Patients receiving concomitant XELODA and oral coumadin-derivative anticoagulants such as warfarin and phenprocoumon should have their anticoagulant response (INR or prothrombin time) monitored frequently in order to adjust the anticoagulant dose accordingly. Altered coagulation parameters and/or bleeding, including death, have been reported during concomitant use.

- Occurrence: Within several days and up to several months after initiating XELODA therapy; may also be seen within 1 month after stopping XELODA
- Predisposing factors: age>60 and diagnosis of cancer

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Etoposide Warning
VePesid (etoposide) should be administered under the supervision of a qualified physician experienced in the use of cancer chemotherapeutic agents. Severe myelosuppression with resulting infection or bleeding may occur.

Fludarabine phosphate Warning
WARNING: CNS TOXICITY, HEMOLYTIC ANEMIA, AND PULMONARY TOXICITY See full prescribing information for complete boxed warning.
Severe central nervous system toxicity occurred in 36% of patients treated with doses approximately four times greater (96 mg/m2/day for 5 days to 7 days) than the recommended intravenous dose. This toxicity was seen in ≤0.2% of patients treated at the recommended intravenous dose levels (25 mg/m2).

Life-threatening and sometimes fatal autoimmune hemolytic anemia has been reported after one or more cycles of treatment.
High incidence of fatal pulmonary toxicity was observed in a clinical investigation of the combination of fludarabine phosphate with pentostatin (deoxycoformycin) for the treatment of refractory chronic lymphocytic leukemia (CLL).

Melphalan Warning
ALKERAN (melphalan) should be administered under the supervision of a qualified physician experienced in the use of cancer chemotherapeutic agents. Severe bone marrow suppression with resulting infection or bleeding may occur. Melphalan is leukemogenic in humans.

Melphalan produces chromosomal aberrations in vitro and in vivo and, therefore, should be considered potentially mutagenic in humans.

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VIVA MEDICARE

Methotrexate Warning

METHOTREXATE SHOULD BE USED ONLY BY PHYSICIANS WHOSE KNOWLEDGE AND EXPERIENCE INCLUDE THE USE OF ANTIMETABOLITE THERAPY BECAUSE OF THE POSSIBILITY OF SERIOUS TOXIC REACTIONS (WHICH CAN BE FATAL):
METHOTREXATE SHOULD BE USED ONLY IN LIFE THREATENING NEOPLASTIC DISEASES, OR IN PATIENTS WITH PSORIASIS OR RHEUMATOID ARTHRITIS WITH SEVERE, RECALCITRANT, DISABLING DISEASE WHICH IS NOT ADEQUATELY RESPONSIVE TO OTHER FORMS OF THERAPY.
DEATHS HAVE BEEN REPORTED WITH THE USE OF METHOTREXATE IN THE TREATMENT OF MALIGNANCY, PSORIASIS, AND RHEUMATOID ARTHRITIS. PATIENTS SHOULD BE CLOSELY MONITORED FOR BONE MARROW, LIVER, LUNG AND KIDNEY TOXICITIES. (See PRECAUTIONS.) PATIENTS SHOULD BE INFORMED BY THEIR PHYSICIAN OF THE RISKS INVOLVED AND BE UNDER A PHYSICIAN'S CARE THROUGHOUT THERAPY.

Methotrexate has been reported to cause fetal death and/or congenital anomalies. Therefore, it is not recommended for women of childbearing potential unless there is clear medical evidence that the benefits can be expected to outweigh the considered risks. Pregnant women with psoriasis or rheumatoid arthritis should not receive methotrexate. Methotrexate elimination is reduced in patients with impaired renal function, ascites, or pleural effusions. Such patients require especially careful monitoring for toxicity, and require dose reduction or, in some cases, discontinuation of methotrexate administration.

Unexpectedly severe (sometimes fatal) bone marrow suppression, aplastic anemia, and gastrointestinal toxicity have been reported with concomitant administration of methotrexate (usually in high dosage) along with some nonsteroidal antiinflammatory drugs (NSAIDs). Methotrexate causes hepatotoxicity, fibrosis and cirrhosis, but generally only after prolonged use. Acutely, liver enzyme elevations are frequently seen. These are usually transient and asymptomatic, and also do not appear predictive of subsequent hepatic disease. Liver biopsy after sustained use often shows histologic changes, and fibrosis and cirrhosis have been reported; these latter lesions may not be preceded by symptoms or abnormal liver function tests in the psoriasis population. For this reason, periodic liver biopsies are usually recommended for psoriatic patients who are under longterm treatment. Persistent abnormalities in liver function tests may precede appearance of fibrosis or cirrhosis in the rheumatoid arthritis population. (See PRECAUTIONS, Organ System Toxicity, Hepatic.)

Methotrexate induced lung disease is a potentially dangerous lesion, which may occur acutely at any time during therapy and which has been reported at doses as low as 7.5 mg/week. It is not always fully reversible. Pulmonary symptoms (especially a dry, nonproductive cough) may require interruption of treatment and careful investigation.

Diarrhea and ulcerative stomatitis require interruption of therapy; otherwise, hemorrhagic enteritis and death from intestinal perforation may occur.

Malignant lymphomas, which may regress following withdrawal of methotrexate, may occur in patients receiving low dose methotrexate and, thus, may not require cytotoxic treatment. Discontinue methotrexate first and, if the lymphoma does not regress, appropriate treatment should be instituted.

Like other cytotoxic drugs, methotrexate may induce "tumor lysis syndrome" in patients with rapidly growing tumors. Appropriate supportive and pharmacologic measures may prevent or alleviate this complication.
Severe, occasionally fatal, skin reactions have been reported following single or multiple doses of methotrexate. Reactions have occurred within days of oral, intramuscular, intravenous, or intrathecal methotrexate administration. Recovery has been reported with discontinuation of therapy.

Potentially fatal opportunistic infections, especially Pneumocystis carinii pneumonia, may occur with methotrexate therapy.
Methotrexate given concomitantly with radiotherapy may increase the risk of soft tissue necrosis and osteonecrosis.

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Topotecan Warning
WARNING: BONE MARROW SUPPRESSION
See full prescribing information for complete boxed warning HYCAMTIN should be administered only to patients with baseline neutrophil counts of ≥1,500 cells/mm3 and a platelet count ≥100,000 cells/mm3. In order to monitor the occurrence of bone marrow suppression, blood cell counts should be monitored.

Definitions:

HCPCS Code—Healthcare Common Procedure Coding System - A system of letter and number codes assigned to procedures, medications, supplies and equipment used for pricing and billing.

ICD-9 Code—International Classification of Disease, 9th edition. A standardized classification of disease, injuries, and causes of death, by etiology and anatomic localization and codified into a 6-digit number, which allows clinicians, statisticians, politicians, health planners and others to speak a common language, both US and internationally.

National Drug Code (NDC): The National Drug Code (NDC) is a number, which uniquely identifies a manufacturer's product in terms of the strength of each tablet/capsule, quantity of tablets/capsules in a package, and other packaging details. Suppliers must use the NDC that matches the product dispensed.

References:

1. Local Coverage Article for Oral Anticancer Drugs. Added as Covered Diagnosis (A50118). Available at: http://www.cms.gov/medicare-coverage-database/details/article-details.aspx?articleId=50118&ver=4&ContrId=140&ContrVer=2&CntrctrSelected=140*2&Date=09%2f26%2f2012&DocID=A50118&bc=hAAAAAgAAAAA&. Accessed September 26, 2012.
2. Local Coverage Article for Oral Anticancer Drugs. Added as Policy Article (A25619). Available at: http://www.cms.gov/medicare-coverage-database/details/article-details.aspx?articleId=25619&ver=38&ContrId=140&ContrVer=2&CntrctrSelected=140*2&Date=09%2f26%2f2012&DocID=A25619&bc=hAAAAAgAAAAA&. Accessed September 26, 2012.
3. Local Coverage Determination (LCD) for Oral Anticancer Drugs (L11559). Revision 9. Available at: http://www.cms.gov/medicare-coverage-database/details/lcd-details.aspx?LCDId=11559&ContrId=140&ver=31&ContrVer=2&Date=01%2f01%2f2014&DocID=L11559&bc=iAAAAAgAAAAAAA%3d%3d& . Accessed June 5, 2014.
4. Myleran [package insert]. Research Triangle Park, NC: GlaxoSmithKline; 2003.
5. Xeloda [package insert]. San Francisco, CA: Genentech, Inc., 2010.
6. Cyclophosphamide [package insert]. Deerfield, IL: Baxter Healthcare Corporation, 2012
7. Vepesid [package insert]. Princeton, NJ: Bristol-Myers Squibb Co., 2004
8. Fludarabine phosphate [package insert]. Bridgewater, NJ: Sanofi-aventis U.S. LLC., 2009
9. Alkeran [package insert]. Research Triangle Park, NC: GlaxoSmithKline, 2011
10. Methotrexate [package insert]. Fort Lee, NJ: Dava Pharmaceuticals, Inc., 2009
11. Temodar [package insert]. Whitehouse Station, NJ: Merck & Co., Inc., 2010
12. Hycamtin [package insert]. Research Triangle Park, NC: GlaxoSmithKline; 2010.

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