



Paclitaxel (Taxol®, Nov-Onxol®)
Revision: 2

Policy Number: M-0016
Last Update: 6/4/2014

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.

When appropriate compendia references the use of one of the chemotherapeutic agents listed in this Article as part of a 'combination therapy', the drug is only approved for use in such 'combinations', and the documentation should reflect, and be specific about, the use of the additional 'combination therapy' drugs.

Coverage Guidelines:

FDA:

- AIDS-related Kaposi's sarcoma, Second line treatment
- Breast cancer, Adjuvant therapy for node-positive disease, administered sequentially to standard doxorubicin-containing regimen
- Breast cancer, After failure of combination chemotherapy for metastatic disease or relapse within 6 months of adjuvant chemotherapy
- Non-small cell lung cancer, First-line therapy, in combination with cisplatin in patients who are not candidates for surgery and/or radiation
- Ovarian cancer, Advanced , first-line therapy in combination with cisplatin
- Ovarian cancer, Advanced, in patients previously treated with chemotherapy

Off Label:

- Angiosarcoma
- Breast cancer
- Cancer of unknown origin
- Carcinoma of bladder
- Carcinoma of esophagus



- Carcinoma of fallopian tube, In combination with carboplatin or cisplatin
- Carcinoma of prostate
- Cervical cancer
- Gastric cancer
- Head and neck cancer
- Malignant lymphoma
- Malignant neoplasm of endometrium of corpus uteri
- Malignant tumor of nasopharynx
- Malignant tumor of peritoneum, Of ovarian origin; in combination with carboplatin or cisplatin
- Multiple myeloma
- Non-small cell lung cancer
- Non-small cell lung cancer, First-line treatment in combination with bevacizumab and carboplatin for advanced/metastatic non-squamous cell disease
- Oligodendroglioma of brain
- Ovarian cancer
- Small cell carcinoma of lung
- Testicular cancer

Coding Information:

HCPCS Code(s)

J9265	INJECTION, PACLITAXEL, 30 MG
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ICD-9 Code(s)

140.0-149.9	MALIGNANT NEOPLASM OF UPPER LIP VERMILION BORDER - MALIGNANT NEOPLASM OF ILL-DEFINED SITES WITHIN THE LIP AND ORAL CAVITY
150.0-151.9	MALIGNANT NEOPLASM OF CERVICAL ESOPHAGUS - MALIGNANT NEOPLASM OF STOMACH UNSPECIFIED SITE
158.8	MALIGNANT NEOPLASM OF SPECIFIED PARTS OF PERITONEUM
158.9	MALIGNANT NEOPLASM OF PERITONEUM UNSPECIFIED
160.0-160.9	MALIGNANT NEOPLASM OF NASAL CAVITIES - MALIGNANT NEOPLASM OF ACCESSORY SINUS UNSPECIFIED
161.0-161.9	MALIGNANT NEOPLASM OF GLOTTIS - MALIGNANT NEOPLASM OF LARYNX UNSPECIFIED

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162.0-162.9	MALIGNANT NEOPLASM OF TRACHEA - MALIGNANT NEOPLASM OF BRONCHUS AND LUNG UNSPECIFIED
171.0	MALIGNANT NEOPLASM OF CONNECTIVE AND OTHER SOFT TISSUE OF HEAD FACE AND NECK
171.2	MALIGNANT NEOPLASM OF CONNECTIVE AND OTHER SOFT TISSUE OF UPPER LIMB INCLUDING SHOULDER
171.3	MALIGNANT NEOPLASM OF CONNECTIVE AND OTHER SOFT TISSUE OF LOWER LIMB INCLUDING HIP
171.5	MALIGNANT NEOPLASM OF CONNECTIVE AND OTHER SOFT TISSUE OF ABDOMEN
171.9	MALIGNANT NEOPLASM OF CONNECTIVE AND OTHER SOFT TISSUE SITE UNSPECIFIED
174.0-176.9	MALIGNANT NEOPLASM OF NIPPLE AND AREOLA OF FEMALE BREAST - KAPOSI'S SARCOMA UNSPECIFIED SITE
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
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
189.1	MALIGNANT NEOPLASM OF RENAL PELVIS
189.2	MALIGNANT NEOPLASM OF URETER
189.3	MALIGNANT NEOPLASM OF URETHRA
195.0	MALIGNANT NEOPLASM OF HEAD FACE AND NECK
197.0	SECONDARY MALIGNANT NEOPLASM OF LUNG
198.6	SECONDARY MALIGNANT NEOPLASM OF OVARY
198.81	SECONDARY MALIGNANT NEOPLASM OF BREAST
199.0	DISSEMINATED MALIGNANT NEOPLASM
199.1	OTHER MALIGNANT NEOPLASM OF UNSPECIFIED SITE

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Background:

Paclitaxel is in a class of medications called antimicrotubule agents. It works by stopping the growth and spread of cancer cells. Paclitaxel injection manufactured with human albumin is used to treat breast cancer that has not improved or that has come back after treatment with other medications. Paclitaxel injection manufactured with polyoxyethylated castor oil is used to treat ovarian cancer (cancer that begins in the female reproductive organs where eggs are formed), breast cancer, and lung cancer. Paclitaxel injection with polyoxyethylated castor oil is also used to treat Kaposi's sarcoma (a type of cancer that causes patches of abnormal tissue to grow under the skin) in people who have acquired immunodeficiency syndrome (AIDS).

Black Box Warning:

WARNING

TAXOL® (paclitaxel) should be administered under the supervision of a physician experienced in the use of cancer chemotherapeutic agents. Appropriate management of complications is possible only when adequate diagnostic and treatment facilities are readily available.

Anaphylaxis and severe hypersensitivity reactions characterized by dyspnea and hypotension requiring treatment, angioedema, and generalized urticaria have occurred in 2 to 4% of patients receiving TAXOL in clinical trials. Fatal reactions have occurred in patients despite premedication. All patients should be pretreated with corticosteroids, diphenhydramine, and H2 antagonists. Patients who experience severe hypersensitivity reactions to TAXOL should not be rechallenged with the drug.

TAXOL therapy should not be given to patients with solid tumors who have baseline neutrophil counts of less than 1500 cells/mm³ and should not be given to patients with AIDS-related Kaposi's sarcoma if the baseline neutrophil count is less than 1000 cells/mm³. In order to monitor the occurrence of bone marrow suppression, primarily neutropenia, which may be severe and result in infection, it is recommended that frequent peripheral blood cell counts be performed on all patients receiving TAXOL.



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.

References:

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2. The NCCN Drugs & Biologics Compendium™ © 2010 National Comprehensive Cancer Network, Inc. <http://www.nccn.org>. Accessed May 23, 2012.
3. Local Coverage Article for Drugs and Biologicals – Chemotherapeutic Agents (A48896) (R4). Available at: http://www.cms.gov/medicare-coverage-database/details/article-details.aspx?articleId=48896&ver=89&ContrlD=213&ContrVer=1&CtrctrSelected=213*1&Date=01%2f01%2f2013&DocID=A48896&bc=hAAAAAgAEAAAAA%3d%3d&. Accessed June 4, 2014.
4. Micromedex® 2.0 Taxol. Available at: http://www.thomsonhc.com/micromedex2/librarian/ND_T/evidencexpert/ND_PR/evidencexpert/CS/8EF07A/ND_AppProduct/evidencexpert/DUPLICATIONSHIELDSYNC/C6A98F/ND_PG/evidencexpert/ND_B/evidencexpert/ND_P/evidencexpert/PFActionId/evidencexpert.IntermediateToDocumentLink?docId=433500&contentSetId=100&title=Paclitaxel&servicesTitle=Paclitaxel. Accessed 6-6-12

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