



Carboplatin (Paraplatin®)

Revision: 3

Policy Number: M-0008

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:

- Ovarian cancer, Advanced (as initial treatment in combination with other approved chemotherapy agents)
- Ovarian cancer, Advanced (palliative treatment of recurrent disease, including patients previously treated with cisplatin)

Off Label:

- Cancer of unknown origin
- Carcinoma of cervix
- Head and neck cancer
- Hodgkin's disease
- Leukemia
- Malignant mesothelioma
- Malignant neoplasm of endometrium of corpus uteri
- Malignant tumor of urinary bladder
- Metastatic breast cancer, HER2 overexpression, first-line therapy in combination with a taxane and trastuzumab



- Non-Hodgkin's lymphoma
- Non-small cell lung cancer
- Non-small cell lung cancer, First-line in combination with paclitaxel and bevacizumab for advanced/metastatic non-squamous cell disease
- Ovarian cancer, Early-stage epithelial, adjuvant therapy
- Primary intracranial tumor
- Retinoblastoma
- Seminoma of testis, Stage I, adjuvant, monotherapy
- Small cell carcinoma of lung
- 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.

Coding Information:

HCPCS Code(s)

J9045	INJECTION, CARBOPLATIN, 50 MG
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ICD-9 Code(s)

140.0-150.9	MALIGNANT NEOPLASM OF UPPER LIP VERMILION BORDER - MALIGNANT NEOPLASM OF ESOPHAGUS UNSPECIFIED SITE
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
160.0-162.9	MALIGNANT NEOPLASM OF NASAL CAVITIES - MALIGNANT NEOPLASM OF BRONCHUS AND LUNG UNSPECIFIED
163.9	MALIGNANT NEOPLASM OF PLEURA UNSPECIFIED
164.0	MALIGNANT NEOPLASM OF THYMUS
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
180.0-180.9	MALIGNANT NEOPLASM OF ENDOCERVIX - MALIGNANT NEOPLASM OF CERVIX UTERI UNSPECIFIED SITE

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182.0-182.9	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
189.0-189.2	MALIGNANT NEOPLASM OF KIDNEY EXCEPT PELVIS - MALIGNANT NEOPLASM OF URETER
190.5	MALIGNANT NEOPLASM OF RETINA
191.0-191.9	MALIGNANT NEOPLASM OF CEREBRUM EXCEPT LOBES AND VENTRICLES - MALIGNANT NEOPLASM OF BRAIN UNSPECIFIED SITE
194.0	MALIGNANT NEOPLASM OF ADRENAL GLAND
195.0	MALIGNANT NEOPLASM OF HEAD FACE AND NECK
197.0	SECONDARY MALIGNANT NEOPLASM OF LUNG
197.6	SECONDARY MALIGNANT NEOPLASM OF RETROPERITONEUM AND PERITONEUM
198.1	SECONDARY MALIGNANT NEOPLASM OF OTHER URINARY ORGANS
198.6	SECONDARY MALIGNANT NEOPLASM OF OVARY
199.0	DISSEMINATED MALIGNANT NEOPLASM
199.1	OTHER MALIGNANT NEOPLASM OF UNSPECIFIED SITE
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
231.2	CARCINOMA IN SITU OF BRONCHUS AND LUNG
233.7	CARCINOMA IN SITU OF BLADDER
235.7	NEOPLASM OF UNCERTAIN BEHAVIOR OF TRACHEA BRONCHUS AND LUNG

Background:

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Paraplatin is classified as an alkylating antineoplastic agent. An alkylating antineoplastic agent is an alkylating agent used in cancer treatment that attaches an alkyl to DNA.

Black Box Warning:

<p style="text-align: center;">WARNING</p> <p>PARAPLATIN®(carboplatin aqueous solution) INJECTION should be administered under the supervision of a qualified physician experienced in the use of cancer chemotherapeutic agents. Appropriate management of therapy and complications is possible only when adequate treatment facilities are readily available.</p> <p>Bone marrow suppression is dose related and may be severe, resulting in infection and/or bleeding. Anemia may be cumulative and may require transfusion support. Vomiting is another frequent drug-related side effect.</p> <p>Anaphylactic-like reactions to carboplatin have been reported and may occur within minutes of PARAPLATIN® administration. Epinephrine, corticosteroids, and antihistamines have been employed to alleviate symptoms.</p>
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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. NCCN Clinical Practice Guidelines in Oncology: Pancreatic Adenocarcinoma. Available at: http://www.nccn.org/professionals/physician_gls/pdf/uterine.pdf. Accessed August 19, 2013.
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=92&ContrId=213&ContrVer=1&CtrctrSelected=213*1&Date=01%2f01%2f2014&DocID=A48896&bc=hAAAAAgAAAAAA%3d%3d&. Accessed June 4, 2014.
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