

▲Measure #104: Adjuvant Hormonal Therapy for High-Risk Prostate Cancer Patients

DESCRIPTION:

Percentage of patients, regardless of age, with a diagnosis of prostate cancer at high risk of recurrence receiving external beam radiotherapy to the prostate who were prescribed adjuvant hormonal therapy (GnRH agonist or antagonist)

INSTRUCTIONS:

This measure is to be reported once per episode of radiation therapy for all patients with prostate cancer who receive external beam radiotherapy to the prostate during the reporting period. Claims data will be analyzed to determine unique episodes of radiation therapy. It is anticipated that clinicians who perform external beam radiotherapy to the prostate will submit this measure.

This measure is reported using CPT Category II codes and/or G-codes:

ICD-9 diagnosis codes and CPT procedure codes are used to identify patients who are included in the measure's denominator. CPT Category II codes and/or G-codes are used to report the numerator of the measure.

When reporting the measure, submit the listed ICD-9 diagnosis codes, CPT procedure codes and the appropriate CPT Category II code AND/OR G-code OR the CPT Category II code with the modifier AND G-code. The modifiers allowed for this measure are: 1P- medical reasons, 2P- patient reasons, 8P- reasons not otherwise specified.

NUMERATOR:

Patients who were prescribed adjuvant hormonal therapy (GnRH [gonadotropin-releasing hormone] agonist or antagonist)

Definitions:

Risk strata definitions:

- Low Risk: PSA \leq 10 mg/dL; AND Gleason score 6 or less; AND clinical stage T1c or T2a²
- Intermediate Risk: PSA > 10 to 20 mg/dL; OR Gleason score 7; OR clinical stage T2b, and not qualifying for high risk²
- High Risk: PSA > 20 mg/dL; OR Gleason score 8 to 10; OR clinical stage T2c or greater; and not qualifying for very high risk²

NUMERATOR NOTE: *The correct combination of numerator code(s) must be reported on the claim form in order to properly report this measure. The "correct combination" of codes may require the submission of multiple numerator codes.*

Numerator Coding:

Adjuvant Hormonal Therapy Prescribed/Administered

(One CPT II code & one G-code [4164F & G8465] are required on the claim form to submit this category)

CPT II 4164F: Adjuvant (ie, in combination with external beam radiotherapy to the prostate for prostate cancer) hormonal therapy (GnRH [gonadotropin-releasing hormone] agonist or antagonist) prescribed/administered

AND

G8465: High risk of recurrence of prostate cancer

OR

Adjuvant Hormonal Therapy not Prescribed/Administered for Medical or Patient Reasons

(One CPT II code & one G-code [4164F-XP & G8465] are required on the claim form to submit this category)

Append a modifier (1P or 2P) to CPT Category II code 4164F to report documented circumstances that appropriately exclude patients from the denominator.

- **4164F with 1P:** Documentation of medical reason(s) for not prescribing/administering adjuvant (ie, in combination with external beam radiotherapy to the prostate for prostate cancer) hormonal therapy (GnRH [gonadotropin-releasing hormone] agonist or antagonist)
- **4164F with 2P:** Documentation of patient reason(s) for not prescribing/administering adjuvant (ie, in combination with external beam radiotherapy to the prostate for prostate cancer) hormonal therapy (GnRH [gonadotropin-releasing hormone] agonist or antagonist)

AND

G8465: High risk of recurrence of prostate cancer

OR

If patient is not eligible for this measure because the risk of recurrence is low, intermediate or not determined, report:

(One G-code [G8464] is required on the claim form to submit this category)

G8464: Clinician documented that prostate cancer patient is not an eligible candidate for adjuvant hormonal therapy; Low or intermediate risk of recurrence OR risk of recurrence not determined

OR

Adjuvant Hormonal Therapy not Prescribed/Administered, Reason not Specified
(One CPT II code & one G-code [4164F-8P & G8465] are required on the claim form to submit this category)

Append a reporting modifier (8P) to CPT Category II code 4164F to report circumstances when the action described in the numerator is not performed and the reason is not otherwise specified.

- 4164F *with* 8P: Patients who were not prescribed/administered adjuvant (ie, in combination with external beam radiotherapy for prostate cancer) hormonal therapy (GnRH [gonadotropin-releasing hormone] agonist or antagonist), reason not otherwise specified

AND

G8465: High risk of recurrence of prostate cancer

DENOMINATOR:

All patients, regardless of age, with a diagnosis of prostate cancer at high risk of recurrence receiving external beam radiotherapy to the prostate

Denominator Coding:

An ICD-9 diagnosis code for prostate cancer and a CPT procedure code for patients receiving external beam radiotherapy to the prostate are required to identify patients for denominator inclusion.

ICD-9 diagnosis code: 185

AND

CPT procedure codes: 77407, 77408, 77409, 77411, 77412, 77413, 77414, 77416, 77418, 77427

RATIONALE:

If receiving external beam radiotherapy, prostate cancer patients with a high risk of recurrence should also be prescribed hormonal therapy, which has been shown to increase the effectiveness of the radiotherapy.

CLINICAL RECOMMENDATION STATEMENTS:

High risk patients who are considering specific treatment options should be informed of findings of recent high quality clinical trials, including that: for those considering external beam radiotherapy, use of hormonal therapy combined with conventional radiotherapy may prolong survival. (AUA) (Standard)

Men with prostate cancer that is clinically localized stage T3a, with Gleason score of 8 to 10, or PSA level greater than 20 ng/mL are categorized by the NCCN panel to be at high risk of recurrence after definitive therapy. Note that patients with multiple adverse factors may be shifted into the very high-risk category. Hormonal therapy (e.g., androgen ablation) plus external-beam RT is recommended. (NCCN) (Category 1)