



Policy owner: Radiation Treatment Program

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Effective Date: November 1, 2005

Revised Date: August 2017

Policy: Brachytherapy Reimbursement Program

Purpose:

To provide users with an online reference regarding pertinent information with respect to the Brachytherapy Reimbursement Program at Cancer Care Ontario.

Policy Statement:

General background

The current brachytherapy reimbursement program is focused on prostate cancer patients. The program reimburses Integrated Cancer Programs (ICPs) for the costs of I-125 seeds and needles used in prostate brachytherapy treatments. Reimbursement is contingent upon compliance with patient eligibility criteria based on an evidence-based summary for this treatment. In addition to being used for reimbursement, the prostate brachytherapy data is used to support program budgeting and cancer system planning.

The prostate brachytherapy database maintains a record of both patient eligibility/enrolment data and treatment data. To be eligible for reimbursement through the program, the ICP must submit eligibility/enrolment data as well as treatment data in compliance with monthly billing deadlines through a web-based application.

The requirements for eligibility/enrolment data and treatment data are outlined below:

1. The ICP must submit this data to Cancer Care Ontario (CCO) and CCO must process it before payment is provided to the ICP.
2. Each patient for whom the ICP is seeking reimbursement must be enrolled in the program by providing eligibility/enrolment data that includes patient-specific demographic information and answers to a series of medical questions.
3. The required treatment data consists of:
 - a. The quantities of each product (seeds and needles) used or discarded as a result of a qualified patient's treatment.

The amount of reimbursement is then calculated from the total of:

1. The cost of the used or discarded products, based on approved reimbursement product cost and the reported quantities.
2. A standard delivery cost.

Eligibility Criteria:

A patient eligibility criterion has been developed based on the joint [American Society of Clinical Oncology/Cancer Care Ontario Guideline Update](#) and the [evidence-based guideline recommendations](#) completed by the Program in Evidence Based Care at CCO.

Low-risk prostate cancer:

- Patients who require or choose active treatment, low-dose rate brachytherapy (LDR) alone, EBRT alone, and/or radical prostatectomy (RP)
- Eligible for LDR brachytherapy alone as monotherapy

Low-intermediate risk prostate cancer:

- As defined by Gleason 7, prostate-specific antigen <10 ng/mL or Gleason 6, prostate-specific antigen, 10 to 20 ng/mL)
- Eligible for LDR brachytherapy alone as monotherapy

Intermediate-risk prostate cancer:

- Patients choosing EBRT *with or without* androgen-deprivation therapy
- Eligible for LDR brachytherapy boost

High-risk prostate cancer:

- As defined by having any of the following characteristics: Classified as T3a, PSA > 20 ng/mL, Gleason between 8 and 10.
- Patients choosing EBRT *with* androgen-deprivation therapy
- Eligible for LDR brachytherapy boost

Approved Clinical Trials:

- Patients enrolled in approved clinical trials are all eligible regardless of Gleason score, stage or serum PSA

Special Access Program:

- Patients approved through the Special Access Program for Prostate Brachytherapy

Ordering of Seeds and Needles:

- Each ICP is responsible for ordering the required seeds and needles per treated case.
- Each ICP is responsible for the payment of the seeds and needles based on vendor's invoice.

Reimbursement:

- CCO will only reimburse ICPs for patients entered into the Brachytherapy Reimbursement database and for the items and quantities identified.
- The cost of used and or discarded products is based on approved reimbursement product cost reported in the web-based application and the reported quantities.

- Any additional costs such as other supplies or differences in pricing between the CCO reimbursement rate and vendors' pricing are required to be covered by the individual ICP operating budget through per case funding.
- Patient data for the month must be entered by the 9th of the following month, as reimbursement invoices are generated on the 10th (for previous month's activity).
- With regards to loose seeds and stranded products preloaded in needles, it is expected that the reimbursement price includes the cost of the needles and that the type of needles can be selected by the centres when placing orders.

Patients entered later than the 9th of month even if treated in the previous month will not be reimbursed.