HEALTH PLAN POLICY

Policy Title: Genetic Testing for Breast and/or Ovarian Cancer
Policy Number: MUM58
Revision: New
Department: Medical Management
Sub-Department: Utilization Management
Applies to Product Lines:
- Medicaid
- Children’s Health Insurance Plan
- Health Insurance Exchange
- Medicare
- USFHP
- Commercial Insured
- Non Insured Business

Origination/Effective Date: 10/09/2019
Reviewed Date(s):
Revision Date(s):

SCOPE:

This policy addresses genetic testing for higher risk individuals relative to either breast or ovarian cancer.

DEFINITIONS AND ACRONYMS:

- American Society of Clinical Oncology (ASCO)
- BRACAnalysis Rearrangement Test (BART)
- National Comprehensive Care Network (NCCN)

POLICY:

Medical necessity is present for this type higher risk genetic screening in selected cases, including known BRAC1/BRAC2 mutations or patients with personal history of cancer that is premature (age < 45) and family history of cancer or male gender. In cases where there is no personal history of cancer, a very strong family history of breast/ovarian cancer in multiple family members that is premature (age <50) also qualifies.

RATIONALE:

Hereditary breast cancer approximates 5% with hereditary ovarian cancer variable as high as 25% - in each instance carrying the BRAC1 (chromosome 17) or BRAC2 (chromosome 1) mutations. Ovarian malignancies tend to be very grade malignancies as well. These biomarkers also may reflect increased risk for pancreatic cancer & melanoma. Ethnic risk increases among European Jews and French Canadians. Extensive evidence in the literature, including NCCN & ASCO, support this type testing in the context of the selective criteria noted above.

REFERENCES:

- NCCN 2019 – Familial History as a Consideration in Genetic Testing
- ASCO2015 – Genetic Testing for Cancer Susceptibility

RELATED DOCUMENTS:

None
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<td>New</td>
<td>10/09/2019</td>
<td>Initial release.</td>
<td>Executive Leadership</td>
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