

Trouble with insurance? Help us help you.

The likelihood of receiving coverage for proton therapy increases when patients engage in the appeals process. See how below.

BCBS TN states that proton therapy is not medically necessary and therefore they will not cover it. What they mean is that proton therapy has not been shown to be more likely to cure cancer and they think the reduction in side effects from proton therapy is NOT worth the increased cost. In 2016, an estimated 16,852 new cases of cancer will be diagnosed due to excess radiation from cancer treatment^{1,2}.

Example Benefits of Proton Therapy by Tumor Site according to Clinical Studies*			
Prostate ^{3,4,5}	Breast ⁶	Lung ⁷	Head and Neck ^{8,9}
26-39% reduction in risk of secondary cancer	33% reduction in risk of serious cardiac side effects for left sided breast cancer	50% reduction in dangerous toxicity	44% increase in disease free survival rates
35-59% less radiation to the bladder and rectum	17% reduction in risk of serious cardiac side effects for right sided breast cancer	50% reduction in cancer recurrence rates	60% reduction in need for feeding tube
		73% increase in median life expectancy	

*Every patient case is different - these figures represent the results of clinical studies comparing proton therapy to conventional radiation over specific populations of patients. Each patient's case is unique and results may vary. This table does not include every benefit of proton therapy.

Medicare and other Blue Cross Blue Shield in other States believe proton therapy is medically necessary

Coverage of Proton Therapy Patients - 2016				
Tumor Site	Medicare	BCBS FL	BCBS LA	BCBS TN
Prostate	Green	Yellow	Green	Red
Breast	Green	Green	Red	Red
Lung	Green	Green	Red	Red
Pediatric Cancer	Green	Green	Green	Green
Brain	Green	Green	Red	Red
Central Nervous System	Green	Green	Green	Green
Colorectal	Green	Green	Red	Red
Head and Neck	Green	Green	Red	Red

*BCBS FL believed that proton therapy for prostate cancer was medically necessary until May, 2016 when they changed their stance. Before this sudden change, BCBS FL was covering 91% of all proton therapy eligible patients. This change in policy was made in lieu of a cost benefit analysis assessing whether it was worth the money to cover proton therapy. They determined that reducing side effects was not worth the cost.

The top 6 cancer centers in the United States believe proton therapy is medically necessary

Top 6 Cancer Centers Provide Proton Therapy to Patients	
University of Texas - MD Anderson	Dana-Farber/Brigham and Women's Cancer Center
Memorial Sloan Kettering	University of Washington/Seattle Cancer Care Alliance
The Mayo Clinic	Johns Hopkins Hospital (under construction)

Proton therapy delivers significantly less radiation to surrounding healthy tissue than IMRT.

The diagram compares Protons and IMRT across four cancer sites: Prostate, Breast, Lung, and Head & Neck. For each site, two cross-sectional diagrams are shown. The Protons column shows two distinct, targeted treatment fields (labeled 'TREATMENT FIELD 1' and 'TREATMENT FIELD 2') that precisely target the tumor (red) while sparing surrounding healthy tissue. The IMRT column shows a single, larger, and more diffuse treatment field (labeled 'MULTIPLE TREATMENT FIELDS') that covers the tumor but also irradiates a significant amount of surrounding healthy tissue. A color scale at the bottom indicates radiation intensity, from low (blue) to high (red).

LOW RADIATION ■ ■ ■ ■ ■ HIGH RADIATION

What We do:

1. Letter of Medical Necessity and/or Recommendation of Treatment choice from other provider(s)
2. Peer to Peer Review Calls
3. Individualized Appeals
4. Multiple levels of appeals – including external reviews
5. Assist with patient appeal/grievance

Your Part:

1. File patient grievance letter (support available)
2. Conference call with us and your insurer
3. Contact your employer – some employers can override insurance coverage decision

How you can help future patients:

1. Letters to BCBST leadership: Address a letter to any or all of the three executives below and ask them why they will not cover proton therapy despite the fact it delivers less radiation, causes fewer side effects, and reduces risk of secondary cancer versus conventional radiation therapy. Send via certified mail to ensure they receive your letter.
 - Ian Hamilton (Corporate Medical Director for East Tennessee)
 - David Moroney (Corporate Medical Director for Provider Network Innovation)
 - Andrea Willis (Chief Marketing Officer)Address: Cameron Hill Circle, Chattanooga, TN 37402
2. Social media: share your story, struggle with being covered, treatment graduation video, or your success in appeals on your personal social media accounts or the BCBSTN Facebook or Twitter accounts
 - BCBST Twitter: @BCBSTennessee
 - BCBST Facebook: <https://www.facebook.com/bcbst/>
3. Notifying your elected officials:
 - Visit <http://www.capitol.tn.gov/districtmaps/> to look up your local representatives
 - Enter your street address and city in the box to the right and it will identify your representatives and their email address
 - Inform them of your diagnosis, potential benefits of proton therapy, and that BCBST won't cover your treatment

Public pressure on BCBS TN is the best way to ensure coverage of proton therapy in the future. Nobody can communicate the need for proton therapy better than those who are being denied access to it.

Contact info for More Resources:

Kristin Coffield (Manager, Patient Services): contact Kristin for opportunities to raise awareness about proton therapy in your community, how to send a certified letter, how to post to social media, or speaking with a former patient about their success efforts to get their insurance to cover treatment.

Call: 865-862-1606
Email: kristin.coffield@provisionproton.com



Citations:

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9. Samir H Patel, Zhen Wang, William W Wong, Mohammad Hassan Murad, Courtney R Buckley, Khaled Mohammed, Fares Alahdab, Osama Altayar, Mohammed Nabhan, Steven E Schild, Robert L Foote. Charged particle therapy versus photon therapy for paranasal sinus and nasal cavity malignant diseases: a systematic review and meta-analysis. *The Lancet Oncology*, 2014; DOI: 10.1016/S1470-2045(14)70268-2