

Eligibility criteria for radiotherapy for cancer care

Southern Cross will only reimburse the cost of external beam radiotherapy for cancer care, specifically intensity-modulated radiation therapy (IMRT) or volumetric modulated arc therapy (VMAT), under a member's policy when **at least one** of the indications for each relevant cancer type below are met for that member.

1) Prostate cancer

- low risk (Stage T1c, T2a)
- intermediate risk (Stage T2b, T3)
- high risk
- post prostatectomy recurrence proven by biopsy or elevated PSA levels based on Trans Tasman Radiation Oncology Group guidelines
- post high dose rate (HDR) treatment, or
- for palliation of symptoms of metastatic disease.

2) Breast cancer

- following conservative surgery
- following total mastectomy
- for treatment of remaining breast tissue or chest wall after surgery, or
- for palliation of symptoms of bone and brain metastases.

3) Primary lung cancer

Non small cell lung cancer (NSCLC)

- radiotherapy alone for early stage disease
- radiotherapy with concurrent chemotherapy for later stage disease,
- as adjuvant treatment following surgery for any stage disease, or
- for palliation of symptoms of inoperable tumour or symptomatic tumour with bone metastases.

Small cell lung cancer (SCLC)

- administered with concurrent chemotherapy, or
- for palliation of symptoms of inoperable tumour or symptomatic tumour with bone metastases.

4) Colorectal cancer

- as primary treatment of advanced rectal or anal cancer causing obstruction
- when administered with concurrent chemotherapy
- for preoperative treatment to shrink the tumour prior to surgery
- for post-operative treatment for close or indistinct margins or when positive lymph nodes are present
- for post-operative treatment when there is a recurrence of tumour, or
- pre and post-operative treatment for Stage I to III primary colorectal cancer
- for palliation of symptoms of Stage III to IV primary colorectal tumour.

5) Anal canal

- primary treatment for Stages I to III anal canal tumours.

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6) Brain

- post-operative treatment of primary gliomas Grade I-IV, or
- post-operative treatment of primary meningioma.

7) Melanoma

- post-operative treatment of melanoma where there are close or indistinct margins or lymph node involvement.

Note: Not covered as a primary treatment.

8) Non-melanoma skin cancers

- post-operative treatment of Stage I-III skin cancers where location makes achieving recommended margins difficult.

Note: Not covered as a primary treatment.

9) Merkel cell cancer

- post-operative treatment of Stage I-III Merkel cell cancer where there are close or indistinct margins or lymph node involvement.

10) Sarcoma

- soft tissue sarcoma or fibroma Stages I-III on extremities.

11) Parotid tumours – benign and malignant

- all disease stages with skin involvement
- post-operative recurrence, or
- for unclear margins on histology.

12) Nasopharyngeal / laryngeal cancer

- primary treatment for disease Stage T1/T2 tumours.

Note: There is no cover for members with feeding difficulties or requiring complex support.

13) Oesophageal cancer

- active treatment of Stage I - III disease
- palliation of symptoms associated with Stage III – IV disease.

14) Lymphoma

- bulky tumour
- Hodgkins lymphoma, or
- palliation of symptoms of nodes.

15) Bone tumours

- primary treatment for bone tumours Stage I-III.

16) Pancreatic cancer

- post-operative treatment for incomplete resection or recurrence.

17) Uterine cancer

- post-operative treatment for close margins or recurrence of tumour Stage II-III, or
- for palliation of symptoms of Stage IV disease, specifically pelvic and/or regional nodes.

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Please also ensure you are familiar with all **policy exclusions**, including:

- Acute care
- Congenital conditions
- Cosmetic treatment/procedures
- Health screening
- Treatment of any condition not detrimental to health
- Unapproved healthcare services.

Refer to the relevant policy document for specific conditions and exceptions that apply to these exclusions.