Assessment

Colorectal Cancer

[INITIAL CONTACT INFORMATION] MET

1. Office Contact Name:

2. Provide direct phone number and extension to individual requesting authorization:

3. Office Fax Number:

4. Is this an out of network/out of plan request? (None)

[IF OUT OF NETWORK/OUT OF PLAN COMPLETE THIS SECTION] MET

1. Who is requesting out of network/out of plan request? (None)

2. What participating provider(s) has the member already seen?

3. What were the participating provider's recommendations?

4. Is the requested service available within the member's network/plan? (None)

5. Please provide the rationale and any pertinent documents to support the request for out of network/out of plan services.

[FAMILIAL ADENOMATOUS POLYPOSIS (FAP) OR ATTENUATED FAMILIAL ADENOMATOUS POLYPOSIS (AFAP) Def. of relative: 1st parent, full sibling, & children, 2nd: grandparent/children, aunt, uncle, nephew, niece & half-sibling, 3rd: great-grandparent & 1st cousin]

1. For confirmatory testing - Does patient have a personal history of FAP or AFAP? (None)

2. For predictive testing - does patient have a first, second, or third degree relative with a disease-causing mutation for FAP in the APC gene? (None)

3. MVH-ASSOCIATED POLYPOSIS (MAP) MET

1. For confirmatory testing - does patient have autosomal recessive inheritance of MAP phenotype? (None)

2. For confirmatory testing - does patient have a history of adenomatous polyps? If yes, select all that apply:

    - Negative Lynch syndrome screening/testing
    - Negative APC mutation testing

3. For predictive testing - does patient have a sibling with known MVH polyposis? (None)

[LYNCH SYNDROME/HEREDITARY NON-POLYPOSIS COLORECTAL CANCER (HNPPC)]

1. For tumor testing - is testing for the gene BRAF, V600E and MLH1 promoter hypermethylation, in a patient with colon cancer when IHC tumor screening identified a loss of MLH1 expression? (None)

2. For tumor testing, is test for Microsatellite instability (MSI) in individuals with stage II colorectal cancer? (None)

3. For tumor testing, does the patient have colorectal cancer, endometrial cancer, or colorectal adenomast? If yes, select all that apply:

    - There are at least three relatives with a cancer associated with HNPPC (i.e., colorectal, cancer of endometrial, small bowel, ureter and renal pelvis)
    - One relative is a first-degree relative of the other two
    - At least one of the relatives with cancer associated with HNPPC was diagnosed before age 50
    - At least two successive generations are affected
    - There is no history of FAP in the colorectal cancer cases
    - Colorectal cancer was diagnosed when patient was under age 50
    - Family history of synchronous, metachronous colorectal or other HNPPC-associated tumors
    - Family history of colorectal cancer with the MSI-H histology diagnosed in an individual who is under age 60
    - Colorectal cancer diagnosed with one or more first-degree relatives with an HNPPC-related tumor, with one of the cancers diagnosed under age 50
    - Colorectal cancer diagnosed in two or more first- or second-degree relatives with an HNPPC-related tumor, regardless of age

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10/19/15
4. For confirmatory testing - does patient have a Lynch syndrome-associated cancer (i.e., colorectal, endometrial, stomach, ovarian, small bowel, ureter or renal pelvis, sebaceous adenoma or carcinoma, hepatobiliary, pancreas, glioblastoma)?

(None) □

5. For confirmatory testing - has tumor analysis been performed on the individual, or blood relative, indicating full sequence analysis is appropriate?

(None) □

6. For confirmatory testing - is tumor analysis on colorectal or endometrial cancer not possible (i.e., insufficient tumor OR individual has a different Lynch syndrome-associated cancer and the relative’s tumor is not available for testing)?

(None) □

7. For confirmatory testing - does patient have at least three relatives with a cancer associated with HNPCC (i.e., colorectal, endometrial, stomach, ovarian, small bowel, ureter or renal pelvis)? If yes, select all that apply:

□ One is a first-degree relative of the other two
□ At least two successive generations are affected
□ At least one of the relatives with cancer associated with HNPCC was diagnosed before age 50
□ No history of FAP in the colorectal cancer cases
□ Colorectal cancer was diagnosed when patient was under age 50
□ Presence of synchronous, metachronous colorectal, or other HNPCC-associated tumors, regardless of age
□ Colorectal cancer with the MSS-H histology diagnosed in an individual who is under age 60
□ Colorectal cancer diagnosed with one or more first-degree relatives with an HNPCC-related tumor, with one of the cancers diagnosed under age 50
□ Colorectal cancer diagnosed in two or more first- or second-degree relatives with an HNPCC-related tumor, regardless of age
□ Patient has endometrial cancer that was diagnosed before age 50

8. For predictive testing - is the testing being performed on an unaffected patient and patient has a first-degree relative with HNPCC associated cancer (i.e., colorectal, cancer of endometrial, stomach, ovarian, small bowel, ureter or renal pelvis)?

(None) □

9. For predictive testing - is the testing being performed on an unaffected patient and patient has a first-degree relative with at least 3 relatives with an HNPCC type cancer? If yes, select all that apply:

□ One relative is a first-degree relative of the other two
□ At least two successive generations are affected
□ At least one of the relatives with cancer associated with HNPCC was diagnosed before age 50
□ No history of FAP in the colorectal cancer cases

10. For predictive testing - is the testing being performed based on tumor analysis from an affected blood relative?

(None) □

11. For predictive testing - are the tumor testing results NOT available for a blood relative affected with a Lynch syndrome-associated cancer?

(None) □

12. For predictive testing - does the patient have a first, second or third degree relative with a disease-causing mutation for Lynch syndrome (genes MLH1, MSH2, MSH6, PMS2, EPCAM/TACSTD1)?

(None) □

MULTI-GENE NEXT-GENERATION SEQUENCING PANELS "MET" □

1. Does the patient meet criteria for genetic testing for one of the hereditary colorectal cancer syndromes (i.e., FAP, AFAP, MAP or Lynch syndrome)?

(None) □

2. Does the patient have Peutz-Jeghers syndrome? If yes, select all that apply:

□ Two or more Peutz-Jeghers-type hamartomatous polyps of the small intestine
□ Muco-cutaneous hyperpigmentation of the mouth, lips, nose, eyes, genitalia, or fingers
□ Family history of PJS

3. Does the patient have Juvenile polyposis syndrome? If yes, select all that apply:

□ Three or more juvenile polyps of the colon
□ Multiple juvenile polyps found throughout the gastrointestinal tract
□ Any number of juvenile polyps in an individual with a family history of JPS

4. Does the patient have Serrated polyposis syndrome? If yes, select all that apply:

□ Five or more serrated (e.g., hyperplastic polyps, sessile serrated adenomas/polyps, traditional serrated adenomas) polyps proximal to the sigmoid colon with two or more polyps >10 mm
□ Any number of serrated polyps proximal to the sigmoid colon and a first-degree relative with serrated polyps
□ Greater than 20 serrated polyps of any size distributed throughout the colon
5. Does the patient have Li-Fraumeni syndrome (LFS)? If yes, select all that apply:
- Known TP53 gene mutation and was diagnosed age <45 years with a sarcoma
- Known TP53 gene mutation with a first degree relative diagnosed age <45 years with cancer
- Known TP53 gene mutation and an additional first or second degree relative in the same lineage with cancer diagnosed age <45 years, or a sarcoma at any age
- Known TP53 gene mutation and patient has a tumor from LFS tumor spectrum before 46 years of age AND one first-or-second-degree relative with any of the aforementioned cancers before age 56 or with multiple primaries at any age
- Known TP53 gene mutation and multiple tumors (except breast), two of which belong to LFS tumor spectrum (e.g., soft tissue sarcoma, osteosarcoma, brain tumor, breast cancer) with the initial cancer occurring before the age of 46 years
- Known TP53 gene mutation and adrenocortical carcinoma or chordoid plexus carcinoma at any age of onset, regardless of the family history

6. Does the patient have Li-Fraumeni syndrome (LFS) with breast cancer and is 35 years or younger with a negative BRCA1/BRCA2 test?

7. Does the patient have Cowden syndrome (CS)? If yes, select all that apply:
- From a family with known PTEN gene mutation
- Meets clinical diagnostic criteria for CS as specified by NCCN
- A personal history of Bannayan-Riley-Ruvalcaba syndrome (BRRS)
- A personal history of Adult Lhermitte-Duclos disease (cerebellar tumors)
- A personal history of Autism spectrum disorder and macrocephaly
- A personal history of two or more biopsy proven ichthyromas

8. Does the patient have Cowden syndrome (CS) and macrocephaly plus two more major criteria? If yes, select all that apply:
- Breast cancer
- Endometrial cancer
- Follicular thyroid cancer
- Multiple gastrointestinal hamartomas or ganglioneuromas
- Macular pigmentation of glans penis
- Mucocutaneous lesions (e.g., one biopsy proven ichthyroma, palmar plantar keratosis, multifocal or extensive oral mucosal papillomatosis, multiple facial papules)

9. Does the patient have Cowden syndrome (CS) and three or more major criteria? If yes, select all that apply:
- Breast cancer
- Endometrial cancer
- Follicular thyroid cancer
- Multiple gastrointestinal hamartomas or ganglioneuromas
- Macrocephaly
- Macular pigmentation of glans penis
- Mucocutaneous lesions (e.g., one biopsy proven ichthyroma, palmar plantar keratosis, multifocal or extensive oral mucosal papillomatosis, multiple facial papules)

10. Does the patient have Cowden syndrome (CS) and four or more minor criteria? If yes, select all that apply:
- Autism spectrum disorder
- Colon cancer
- Esophageal glycogenic acanthosis (greater than or equal to three)
- Lipomas
- Mental retardation
- Papillary or follicular variant of papillary thyroid cancer
- Thyroid structural lesions
- Renal cell carcinoma
- Single GI hamartoma
- Testicular lipomatosis
- Vascular anomalies (including multiple intracranial developmental venous anomalies)

11. Does the patient have Cowden syndrome (CS) and a first degree relative with a diagnosis of CS or BRRS for whom testing has not been performed and the relative has at least one of the following? If yes, select all that apply:
- Breast cancer
- Endometrial cancer
- Follicular thyroid cancer
- Multiple gastrointestinal hamartomas or ganglioneuromas
- Macrocephaly
- Macular pigmentation of glans penis
- Mucocutaneous lesions (e.g., one biopsy proven ichthyroma, palmar plantar keratosis, multifocal or extensive oral mucosal papillomatosis, multiple facial papules)

12. Does the patient have Cowden syndrome (CS) and a first degree relative with a diagnosis of CS or BRRS for whom testing has not been performed and the relative has at least two of the following? If yes, select all that apply:
- Autism spectrum disorder
- Colon cancer
- Esophageal glycogenic acanthosis (greater than or equal to three)
- Lipomas
- Mental retardation
- Papillary or follicular variant of papillary thyroid cancer
- Thyroid structural lesions
- Renal cell carcinoma
- Single GI hamartoma
- Testicular lipomatosis
- Vascular anomalies (including multiple intracranial developmental venous anomalies)

FAMILY HISTORY: MET

1. If a relative of the member is affected with any of the disease processes as listed above, list the relationship to the member and age at the time of diagnosis: [ ]
1. Additional Clinical Information to Support the Requested Service

2. Confirm any relevant documentation to support the requested service has been attached or Faxed to 313 664 5701.
   - (None)

3. If HAP is not the primary insurer for this patient, has the primary insurer already denied request/coverage?
   - (None)

4. I certify the above information is entered for the right member, is true and accurate, and supported by medical records:
   - (None)