MEDICAL POLICY

MEDICAL POLICY DETAILS	
Medical Policy Title	**Clinical Trials**
Policy Number	**11.01.10**
Category	**Contract Clarification**
Original Effective Date	**01/24/02**
Committee Approval Date	**03/27/03, 02/26/04, 02/24/05, 12/01/05, 10/26/06, 08/23/07, 08/28/08**
Current Effective Date	**09/18/24**
Archived Date	**08/27/09**
Archive Review Date	**08/26/10, 08/25/11, 08/23/12, 08/22/13, 12/12/13, 12/11/14, 12/10/15, 12/08/16, 12/14/17, 12/13/18, 12/12/19, 12/10/20, 11/18/21, 10/20/22, 09/21/23, 09/18/24**
Product Disclaimer	• *Services are contract dependent; if a product excludes coverage for a service, it is not covered, and medical policy criteria do not apply.* • *If a commercial product (including an Essential Plan or Child Health Plus product), medical policy criteria apply to the benefit.* • *If a Medicaid product covers a specific service, and there are no New York State Medicaid guidelines (eMedNY) criteria, medical policy criteria apply to the benefit.* • *If a Medicare product (including Medicare HMO-Dual Special Needs Program (DSNP) product) covers a specific service, and there is no national or local Medicare coverage decision for the service, medical policy criteria apply to the benefit.* • *If a Medicare HMO-Dual Special Needs Program (DSNP) product DOES NOT cover a specific service, please refer to the Medicaid Product coverage line.*

POLICY STATEMENT

I. A member requesting coverage for participation in an approved clinical trial must be eligible, under the trial's protocol, to participate in the clinical trial, which must be related to the treatment of cancer or other life-threatening disease or condition, and either:

   A. The member's referring provider has concluded that the member's participation in the trial is appropriate to treat the member's life-threatening disease or condition; or

   B. The member provides medical and scientific information establishing that the member's participation in the trial would be appropriate to treat the member's life-threatening disease or condition.

II. An approved clinical trial means a phase I, phase II, phase III, or phase IV clinical trial that is conducted in relation to the prevention, detection, or treatment of cancer or other life-threatening disease or condition and meets the criteria set forth in A, B, or C below:

   A. The clinical trial is approved or funded by any of the following:

      1. The National Institutes of Health;
      2. The Centers for Disease Control and Prevention;
      3. The Agency for Health Care Research and Quality;
      4. The Centers for Medicare & Medicaid Services;
      5. A cooperative group or center of any of the entities described in 1 through 4 above or of the Department of Defense, or the Department of Veterans Affairs;
      6. A qualified non-governmental research entity identified in the guidelines issued by the National Institutes of Health for center support grants; or
      7. The Department of Veterans Affairs, the Department of Defense, or the Department of Energy, if the study or investigation has been reviewed and approved through a system of peer review that the

Secretary of the agency determines:
   a. To be comparable to the system of peer review of studies and investigations used by the National Institutes of Health; and
   b. Assures unbiased review of the highest scientific standards by qualified individuals who have no interest in the outcome of the review.

B. The clinical trial is conducted under an investigational new drug (IND) application reviewed by the U.S. Food and Drug Administration (FDA).
C. The clinical trial is a drug trial that is exempt from the FDA's IND application process.

III. A copy of the clinical trial protocol, including the institutional review board (IRB) approval, must be provided to the Health Plan.

POLICY GUIDELINES

I. The routine costs of approved clinical trials that qualify for coverage are **eligible for coverage**. Routine costs include:
   A. Items and/or services that would be provided if there were no clinical trial (e.g., conventional care such as hospital services, room and board, physician services, office visits, laboratory and diagnostic tests);
   B. Items and/or services required to administer the item or service being investigated (e.g., administration of a chemotherapy drug being tested);
   C. Clinical monitoring of the effects of the item and/or service being investigated;
   D. Items and/or services for the prevention of complications; and
   E. Other reasonable and necessary items and/or services arising from the trial (e.g., the diagnosis or treatment of complications).

II. Non-routine costs include, but are not limited to, the following and are **ineligible for coverage**:
   A. The item and/or service being investigated;
   B. Items and/or services provided only to satisfy the collection and analysis of data for the trial, which are not used in the direct clinical management of the patient (e.g., monthly CT scans when only a single scan would be medically necessary, transportation to and from the study site);
   C. Items and/or services inconsistent with the established standard of care for the patient's diagnosis (e.g., the study of a new combination of drugs in order to determine the safety and efficacy of those drugs when used in combination);
   D. Items and/or services provided by the research sponsors free of charge; and
   E. Duplicative items and/or services.

III. For Medicare Advantage members, original Medicare (not Medicare Advantage) is primary for routine services rendered as part of a clinical trial. Refer to the CMS section of this policy, regarding routine costs of clinical trials and special rules regarding clinical trials for Medicare Advantage members.

DESCRIPTION

Clinical trials are research studies, conducted with patients, which are designed to answer scientific questions and to achieve multiple ends. Clinical trials may or may not involve investigational treatments.

Clinical Trials may:

I. Evaluate the safety and efficacy of new investigational treatments in comparison to standard or conventional treatments;
II. Compare differing doses of FDA-approved drugs;
III. Compare different combinations of approved drugs;
IV. Compare two conventional treatments (e.g., tissue plasminogen activator (TPA) and streptokinase); or
V. Compare the timing of two standard interventions (e.g., surgery and radiation therapy).

Types of Clinical Trials include:

I. Treatment trials, which test experimental treatments, new combinations of drugs, or new approaches to surgery or radiation therapy;
II. Prevention trials, which look for better ways to prevent disease in people who have never had the disease or to prevent the disease from returning. These approaches may include medicines, vaccines, vitamins, minerals, or lifestyle changes;
III. Diagnostic trials, which are conducted to find better tests or procedures for diagnosing a particular disease or condition;
IV. Screening trials, which test the best way to detect certain diseases or health conditions; or
V. Quality of Life trials (or supportive dare trials), which explore ways to improve comfort and the quality of life for individuals with a chronic illness.

Phases of Clinical Trials:

I. Phase I trials: Researchers test an experimental drug or treatment in a small group of people (20-80) for the first time, to evaluate its safety, determine a safe dosage range, and identify side effects.
II. Phase II trials: The experimental study drug or treatment is given to a larger group of people (100-300), to see if it is effective and to further evaluate its safety.
III. Phase III trials: The experimental study drug or treatment is given to large groups of people (1,000-3,000), to confirm its effectiveness, monitor side effects, compare it to commonly used treatments, and collect information that will allow the experimental drug or treatment to be used safely.
IV. Phase IV trials: Post-marketing studies delineate additional information including the drug's risks, benefits, and optimal use.

All research studies are not of comparable quality. While many studies are well-designed, using proper scientific methodology and avoiding bias, others are not. Data from poorly designed, poor-quality studies are not meaningful and cannot be used to resolve scientific questions.

The Affordable Care Act (ACA) requires the Health Plan to provide coverage for members covered under insured, non-grandfathered health plans, for the standard of care costs associated with participation in clinical trials, for plan years beginning on or after January 1, 2014. Under the ACA, routine costs include all items and services that the Health Plan would cover for a patient not enrolled in a clinical trial. For purposes of clinical trials, the ACA defines “life-threatening” as “any disease or condition from which the likelihood of death is probable unless the course of the disease or condition is interrupted.”

CODES

- *Eligibility for reimbursement is based upon the benefits set forth in the member’s subscriber contract.*
- *CODES MAY NOT BE COVERED UNDER ALL CIRCUMSTANCES. PLEASE READ THE POLICY AND GUIDELINES STATEMENTS CAREFULLY.*
- *Codes may not be all inclusive as the AMA and CMS code updates may occur more frequently than policy updates.*
- *Code Key: Experimental/Investigational = (E/I), Not medically necessary/ appropriate = (NMN).*

CPT Codes

Code	Description
No specific code(s)	

HCPCS Codes

Code	Description
S9988	Services provided as part of a Phase I clinical trial

Code	Description
S9990	Services provided as part of a Phase II clinical trial
S9991	Services provided as part of a Phase III clinical trial
S9992	Transportation costs to and from trial location and local transportation costs (e.g., fares for taxicab or bus) for clinical trial participant and one caregiver/ companion
S9994	Lodging costs (e.g., hotel charges) for clinical trial participant and one caregiver/ companion
S9996	Meals for clinical trial participant and one caregiver/companion

Modifiers

Code	Description
FB	Item provided without cost to provider, supplier or practitioner, or full credit received for replaced device (examples, but not limited to covered under warranty, replaced due to defect, free samples)
Q0	Investigational clinical service provided in a clinical research study that is in an approved clinical research study
Q1	Routine clinical service provided in a clinical research study that is in an approved clinical research study

ICD10 Codes

Code	Description
Z00.6	Encounter for examination for normal comparison and control in clinical research program
Numerous	

REFERENCES

*National Institutes of Health, Department of Health and Human Services. Clinical Trials Registration and Results Information Submission. Final rule. Fed Regist 2016 Sep 21;81(183):64981-5157.

US Dept of Labor Employee Benefits Security Administration. FAQs about the Affordable Care Act implementation part 40. 2019 Aug 26 [https://www.dol.gov/agencies/ebsa/about-ebsa/our-activities/resource-center/faqs/aca-part-40] accessed 08/08/24.

US National Institutes of Health. Clinicaltrials.gov. Clinical research trials and you. [https://www.nih.gov/health-information/nih-clinical-research-trials-you] accessed 08/08/24.

*Zon R, et al. American Society of Clinical Oncology Statement on minimum standards and exemplary attributes of clinical trial sites. J Clin Oncol 2008 May 20;26(15):2562-7.

*Key Article

KEY WORDS

Clinical research, Clinical studies, Clinical trials.

CMS COVERAGE FOR MEDICARE PRODUCT MEMBERS

There is currently a National Coverage Determination (NCD# 310.1) for Routine Costs in Clinical Trials. Please refer to the following website for Medicare Members: https://www.cms.gov/medicare-coverage-database/view/ncd.aspx?NCDId=1&fromdb=true accessed 08/08/24.

There is a section in the Medicare Managed Care Manual that addresses Special Rules for the September 2000 NCD on Clinical Trials in the chapter addressing Payments to Medicare Advantage Organizations, section 40.4.3. Please refer to the following website for Medicare Advantage Members: http://www.cms.hhs.gov/manuals/downloads/mc86c08.pdf accessed 08/08/24.

Coverage with Evidence Development (CED) is a paradigm whereby Medicare covers items and services on the condition that they are furnished in the context of approved clinical studies or with the collection of additional clinical data. In making coverage decisions involving CED, CMS decides after a formal review of the medical literature to cover an item or service only in the context of an approved clinical study or when additional clinical data are collected to assess the appropriateness of an item or service for use with a particular beneficiary. Please refer to the following website for NCDs requiring CED: https://www.cms.gov/Medicare/Coverage/Coverage-with-Evidence-Development/index.html accessed 08/08/24.

There is a local coverage article (LCA# A52840) for clinical trials. Please refer to the following website for Medicare Members: https://www.cms.gov/medicare-coverage-database/view/article.aspx?articleId=52840&Cntrctr=275 accessed 08/08/24.