

Health Technology Clinical Committee

Date: May 17, 2019

Time: 8:00 am – 3:00 pm

Location: SeaTac Conference Center, SeaTac, WA

Adopted: Pending

Meeting materials and transcript are available on the [HTA website](#).

Draft HTCC Minutes

Members present: John Bramhall, MD, PhD; Gregory Brown, MD, PhD; Janna Friedly, MD; Chris Hearne, BSN, DNP, MPH; Austin McMillin, DC; Laurie Mischley, ND, MPH, PhD; Sheila Rege, MD MPH; Seth Schwartz, MD, MPH; Mika Sinanan, MD, PhD; Kevin Walsh, MD; Tony Yen, MD.

Clinical expert: Smith Apisarnthanarax, MD

HTCC Formal Action

- 1. Call to order:** Dr. Brown, chair, called the meeting to order; members present constituted a quorum.
- 2. HTA program updates:** Josh Morse, program director, presented HTCC meeting protocols and guidelines; a high-level overview of the purpose, development, and history of the HTA program; a how-to participate in the HTCC process; upcoming topics; and a meetings calendar.
- 3. January 18, 2018 meeting minutes:** Draft minutes reviewed. Motion made and seconded to approve the minutes as written.

Action: *Nine committee members approved the January 18, 2018 meeting minutes.*

- 4. Sacroiliac joint fusion - draft findings and decision:** Chair referred members to the draft findings and decision and called for further discussion. Five comments were received on the draft decision, two cited evidence. The committee discussed the comments and made no changes to the previous draft. Motion made and seconded to accept the findings and decision.

Action: *Ten committee members voted to approve the sacroiliac joint fusion findings and decision.*

- 5. Peripheral nerve ablation - draft findings and decision:** Chair referred members to the draft findings and decision and called for further discussion. Three public comments were received regarding the topic. Two cited evidence including a recently published followed-up study. The committee discussed the comments and made no changes to the previous draft. Motion made and seconded to accept the findings and decision.

Action: *Nine committee members voted to approve the peripheral nerve ablation findings and decision. One member recused himself.*

Draft

6. Proton beam therapy – re-review:

Clinical expert: The chair introduced Smith Apisarnthanarax, MD, Associate Professor of Radiation Oncology, Director of Clinical Research, Associate Residency Program Director, Proton Therapy Fellowship Director, Department of Radiation Oncology, University of Washington and Seattle Cancer Care Alliance.

Agency utilization and outcomes: Judy Zerzan MD, MPH, Chief Medical Officer, Washington State Health Care Authority presented the state agency perspective on proton beam therapy. Find the full presentation published with the [May 17 meeting materials](#).

Scheduled and open public comments: Chair called for public comments. Scheduled public comments provided by the following:

- Andrew I. Chang, MD, California Protons Cancer Therapy Center. Representing the National Association for Proton Therapy
- Steven J. Frank, MD, Professor and Deputy Head, Radiation Oncology, Executive Director, University of Texas Particle Therapy Institute. Representing the National Association for Proton Therapy
- William F. Hartsell, MD, Northwestern Medicine. Representing the National Association for Proton Therapy
- Sameer R. Keole, MD, Mayo Clinic. Representing the National Association for Proton Therapy
- Ramesh Rengan, MD, PhD, Medical Director, SCCA Proton Therapy Center Associate Member, Clinical Research Division, Fred Hutchinson Cancer Research Center. Representing the Seattle Cancer Care Alliance Proton Therapy Center
- Ralph Ermoian, MD, Pediatric Radiation Oncologist, UW Medical Center, Seattle Children's, SCCA Proton Therapy Center. Representing the Seattle Cancer Care Alliance Proton Therapy Center
- Charles Bloch, PhD, Associate Director of Medical Physics, Seattle Proton Therapy Center. Representing the Seattle Cancer Care Alliance Proton Therapy Center
- Jing Zeng, MD, Associate Medical Director, Seattle Proton Therapy Center. Representing the Seattle Cancer Care Alliance Proton Therapy Center

No additional (day-of or non-scheduled) public comments were provided.

Find all public presentations published with the [May 17 meeting materials](#).

Vendor report/ HTCC question and answers: Andrea C. Skelly, PhD, MPH, Aggregate Analytics, Inc., presented the evidence review for proton beam therapy. Find the full report published with the [May 17 meeting materials](#).

HTCC coverage vote and formal action:***Committee decision***

Based on the deliberations of key health outcomes, the committee decided that it had the most complete information: a comprehensive and current evidence report, public comments, and state agency utilization information. The committee concluded that the current evidence on proton beam therapy demonstrates that there is sufficient evidence to cover or cover with conditions. The committee considered all the evidence and gave greatest weight to the evidence it determined, based on objective factors, to be the most valid and reliable. Based on these findings, the committee voted to cover with conditions or cover

proton beam therapy based on age. For pediatric patients (less than 21 years of age) the technology is covered. For adults (21 years of age and older) the technology is covered with conditions.

	Not covered	Covered under certain conditions	Covered unconditionally
Children/ adolescents less than 21 years old	0	1	9
Individuals 21 years old and older	0	10	0

Discussion

The committee reviewed and discussed the available studies for use of proton beam therapy. Details of study design, inclusion criteria, outcomes and other factors affecting study quality were discussed. A majority of committee members found the evidence sufficient to determine that use of proton beam therapy is safer and more efficacious than comparators for some conditions, and that cost-effectiveness is unproven.

Limitations

For individuals 21 years old and older proton beam therapy is a **covered with conditions** for the following cancers:

- Esophageal
- Head/Neck
- Skull-based
- Primary hepatocellular carcinoma
- Brain/Spinal
- Ocular
- Other cancers where all other treatment options are contraindicated after review by a multi-disciplinary tumor board.

Non-covered indicators

Proton beam therapy is not covered for all other conditions.

Action

The committee checked for availability of a Centers for Medicare and Medicaid Services (CMS) national coverage decision (NCD). There is no Medicare NCD for proton beam therapy.

The committee discussed clinical guidelines identified for proton beam therapy from the following organizations:

- American College of Radiology (ACR) (2014 – 2018)
- American Imaging Management (AIM) (2018)
- American Society of Clinical Oncology (ASCO) (2018)
- American Society for Radiation Oncology (ASTRO) (2018)
- National Cancer Care Network (NCCN) (2018)
- National Institute for Health and Care Excellence (NICE) (2018)

Draft

The committee's determination is consistent with these guidelines.

The committee chair directed HTA staff to prepare a findings and decision document on use of proton beam therapy for public comment, to be followed by consideration for final approval at the next public meeting.

7. Meeting adjourned