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RMHP Transpupillary Thermotherapy

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Description

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Transpupillary thermotherapy (TTT), also called diode laser hyperthermia is a method that utilizes diode laser to raise the temperature within the tumor tissue, causing heat induced sclerosis of vascular channels and eventually tumor regression and resolution of subretinal fluid. Transpupillary thermotherapy has been used to treat ocular tumors such as choroidal melanoma and retinoblastoma and also proposed for choroidal neovascularization and macular degeneration. Transpupillary thermotherapy differs from laser photocoagulation in that it uses a different type of laser and targets the tumor cells directly rather than the blood vessels supplying the tumor.

Clinical Indications for Procedure

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RMHP uses UHC guidelines for Transpupillary Thermotherapy:

Transpupillary thermotherapy is **unproven and not medically necessary** for treating all other indications due to insufficient evidence of efficacy. These include but are not limited to: Choroidal neovascularization, Macular degeneration.

- The member with **Medicare (CareAdvantage, DSNP), CO RAE PRIME (Medicaid), CHP Plus, or Commercial** plan needs Transpupillary Thermotherapy for treating **1 or more** of the following
 - Choroidal melanoma
 - Retinoblastoma

Evidence Summary

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RMHP follows UHC guidelines for Transpupillary Thermotherapy. See References.

Policy History

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Policy created 9/7/2021 to follow UHC guidelines; policy RMHP-AC-5036 retired 9/7/2021. Reviewed and approved by committee hierarchy 11/18/2021. Annual review and approval by committee hierarchy 12/29/2022. Annual review 10/10/2023.

References

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UnitedHealthcare® Commercial and Individual Exchange Medical Policy Transpupillary Thermotherapy Policy Number: 2023T0569M Effective Date: October 1, 2023, reviewed 10/10/2023 web location: [Transpupillary Thermotherapy – Commercial and](#)

[Individual Exchange Medical Policy \(uhcprovider.com\)](#) and internally: S:\GJ_SHARE\CM\Policy. Process. Workflows\Clinical Policy_Coverage Guidelines\Clinical GMM\MCG UHC Guideline Copies filename UHC transpupillary-thermotherapy-IFP

UnitedHealthcare® Community Plan Medical Policy Transpupillary Thermotherapy Policy Number: CS134.M Effective Date: July 1, 2023, reviewed 10/10/2023 web location [Transpupillary Thermotherapy – Community Plan Medical Policy \(uhcprovider.com\)](#)

and internally: S:\GJ_SHARE\CM\Policy. Process. Workflows\Clinical Policy_Coverage Guidelines\Clinical GMM\MCG UHC Guideline Copies filename UHC transpupillary-thermotherapy-cs

Codes

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