Physician Worksheet for Colorectal Cancer  
Medicare Advantage Prior Authorization Request

Prior Authorization for Therapeutic Radiation Procedures Including  
Intensity Modulation Radiation Treatment (IMRT), Stereotactic Radio Surgery (SRS) and Stereotactic Body Radiation Therapy (SBRT)

This worksheet is a tool to help you identify and collect the clinical information required to support a prior authorization request for Medicare Advantage members. After the clinician completes the clinical information, please go to UHCprovider.com > Prior Authorization and Notification > Oncology > Medicare Advantage Therapeutic Radiation to submit the prior authorization request. Submitting the clinical information from this worksheet alone won’t automatically result in prior authorization approval. If you have questions about prior authorization submissions or need to request an expedited review, please call UnitedHealthcare Clinical Requests at 866-889-8054.

| Member name: |  |
| Please provide the radiation therapy treatment start date (MM/DD/YYYY): | ______ / ______ / ______ |

1. Will the treatment be directed to the primary site?  
   □ Yes  □ No

**Do not proceed if treatment is being directed to a metastatic site, such as bone, brain, liver, or lung. Instead, complete the appropriate worksheet for the metastatic site.**

2. Does the member have distant metastatic disease?  
   □ Yes  □ No

3. What is the intent/timing for radiation therapy treatment?  
   - □ Adjuvant radiation (post-operative)  
   - □ Neo-adjuvant (pre-operative)  
   - □ Initial primary treatment/definitive (no surgery planned)  
   - □ Retreatment of an area that is immediately adjacent to or has been previously irradiated  
   - □ Palliation of primary or regional area disease

4. What is the treatment technique being requested? (select one only)  
   - □ IMRT  
   - □ SBRT (up to 5 treatment fractions)  
   - □ SBRT boost (up to 5 treatment fractions)  
   - □ Other: ________________________________

5. If IMRT is requested, is the intended IMRT dose greater than 54 Gy?  
   □ Yes  □ No

6. Please note any additional information below.

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