



CIRCULAR

Reference: Haematology oncology PMB definition guidelines  
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 Date: 2019/07/15

CIRCULAR 53 OF 2019: BENEFIT DEFINITION SUBMISSIONS FOR ADULT AND PAEDIATRIC HAEMATOLOGY ONCOLOGY CONDITIONS

The Council for Medical Schemes (CMS) is calling for submissions for the benefit definition on haematology oncology conditions for both adults and paediatrics. Given the breadth of haematology oncology conditions, multiple meetings will be held in 2019 and 2020.

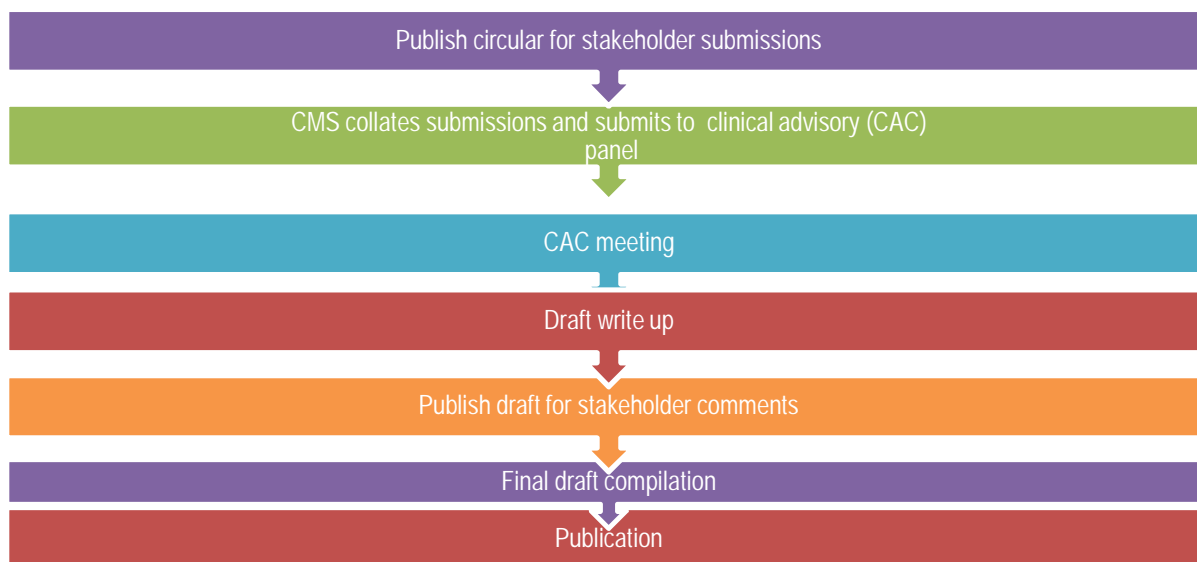
Please take notes of the dates below:

Meeting date	Haematology oncology conditions	Deadline for submissions	Deadline for CVs
22 August 2019	Mature B-cell neoplasms <ul style="list-style-type: none"> <li>- Chronic lymphocytic leukemia</li> <li>- Follicular lymphoma</li> <li>- Pediatric-type follicular lymphoma</li> <li>- Mantle cell lymphoma</li> <li>- Diffuse large B-cell lymphoma (DLBCL)</li> <li>- Marginal zone lymphoma</li> <li>- High grade B cell lymphoma</li> <li>- Burkitt's lymphoma</li> </ul>	15 August 2019	1 August 2019
12 September 2019	Mature T-cell and NK-cell lymphoma <ul style="list-style-type: none"> <li>- T-cell prolymphocytic leukemia</li> <li>- Adult T cell leukemia/lymphoma</li> <li>- Peripheral T-cell lymphoma</li> <li>- Cutaneous T-cell lymphoma</li> </ul> Hodgkin's lymphoma Post-transplant lymphoma Histiocytic and dendritic cell tumours	4 September 2019	
24 October 2019 (TBC)	Acute myeloid leukemia (AML) and related neoplasms Myelodysplastic syndromes (MDS) <ul style="list-style-type: none"> <li>- Myeloproliferative neoplasms (MPN)</li> <li>- Chronic myeloid leukemia (CML)</li> <li>- Chronic neutrophilic leukemia (CNL)</li> <li>- Polycythemia vera (PV)</li> <li>- Myelofibrosis</li> <li>- Essential thrombocythemia</li> </ul>	16 October 2019	

The CMS will follow the 2016 revision of the World Health Organization classification of lymphoid neoplasms, myeloid neoplasms and acute leukemias in the review. Conditions will also be prioritized based on complaints trends observed by the CMS.

Despite the PMB review process that is currently underway, there is an existing gap in the management of some conditions which warrants the need to continuously develop practice guidelines. These guidelines will be updated and reviewed once the PMB review process is finalized.

The process for PMB definition process is outlined below.



All stakeholders who would like to be part of the clinical advisory committee meeting can email their CVs to [pmbprojects@medicalschemes.com](mailto:pmbprojects@medicalschemes.com). The committee will consider all the submissions received and propose recommendations regarding the basket of benefits and care to be made available in the management of the relevant haematology oncology conditions. In order to protect the intellectual property of stakeholders, submissions will be treated as anonymous and distributed to committee members only.

Dr S. Kabane

Chief Executive and Registrar

Council for Medical Schemes

## TEMPLATE FOR HAEMATOLOGY ONCOLOGY

*Please highlight any differences between adults and paediatrics where applicable*

### Diagnostic workup basket

Consultations – specify the disciplines and the number of consultations per discipline
Imaging radiology
Imaging procedures
Laboratory investigations
Histopathology
<i>Exclusions</i>

### Staging and risk assessment basket

Consultations – specify the number of consultations per discipline
Imaging radiology
Imaging procedures
Laboratory investigations
Histopathology
<i>Exclusions</i>

### Treatment options

Chemotherapy <ul style="list-style-type: none"><li>- First and subsequent lines</li><li>- Maintenance</li><li>- Relapse/ refractory disease</li><li>- Any relevant entry and exit criteria for specific drugs should be included</li></ul>
Radiotherapy
Stem cell/ bone marrow transplantation – specify inclusion and exclusion criteria
Exclusions

### Response evaluation and follow up

Consultations – specify the number of consultations per discipline
Imaging radiology
Imaging procedures
Laboratory investigations
Histopathology
<i>Exclusions</i>

### Best supportive care

- Include all interventions for managing complications or treatment side effects which is specific to haematology oncology – e.g. severe bleeding, hypercoagulation, thrombosis, infections.
- Do not include general oncology complications – e.g. chemotherapy induced nausea and vomiting as these are already covered with the other oncology conditions.

Any other comments