## Appendix A. Codes used to identify the study cohort

Radiation type	HCPCS code
3-dimensional conformal therapy planning*	77295 or 77290 and 76370 or 77290 and 77014
3-dimensional conformal therapy treatment	77401, 77402, 77403, 77404, 77406, 77407, 77408, 77409, 77411, 77412, 77413, 77414, 77416
IMRT treatment	77418, 0073T, or G0174

Source: Authors' analysis of linked Surveillance,

Epidemiology, and End Results (SEER)-Medicare data.

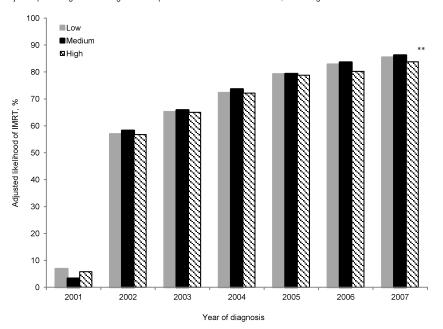
Notes: \*There are not specific treatment codes for 3dimensional conformal therapy, which necessitates the use of planning codes. HCPCS is Healthcare Common Procedure Coding System.

Characteristics	2001		2004		2007	
	3D-CRT (n=4874)	IMRT (n=401)	3D-CRT (n=1973)	IMRT (n=3052)	3D-CRT (n=579)	IMRT (n=4842)
Tumor grade <sup>§</sup>						
Well/moderately differentiated	3520 (72)	282 (70)	687 (35)	1317 (43)****	133 (23)	1747 (36)****
Poorly/ undifferentiated	1240 (25)	111 (28)	1265 (64)	1696 (56)	424 (73)	3057 (63)
Clinical stage <sup>†</sup>						
T1	1758 (36)	169 (42)**	880 (45)	1478 (48)**	278 (48)	2566 (53)****
T2	2839 (58)	205 (51)	936 (47)	1383 (45)	223 (39)	1941 (40)
T3/T4	190 (4)	15 (4)	119 (6)	142 (5)	51 (8)	242 (6)

Appendix B. Tumor grade and stage characteristics of the study population

Source: Authors' analysis of linked Surveillance, Epidemiology, and End Results (SEER)-Medicare data. Notes: Data are presented as number (percent). Typically, less differentiated and higher stage tumors have a worse prognosis due to the aggressiveness of disease. IMRT is intensity-modulated radiotherapy. 3D-CRT is 3-dimensional conformal therapy. Chi-square tests were performed for all categorical variables. <sup>§</sup>In all, 242 cases with unknown tumor grade. <sup>†</sup>In all, 306 cases with unknown clinical stage. Percentages might not sum to 100 because of rounding. <sup>\*\*</sup>p<0.05 <sup>\*\*\*</sup>p<0.01 <sup>\*\*\*\*</sup>p<0.001

## Appendix C.



Adjusted percentage of receiving IMRT compared to other radiation treatments, according to socioeconomic status

Source: Authors' analysis of linked Surveillance, Epidemiology, and End Results (SEER)-Medicare data. Notes: The likelihood of IMRT utilization compared to 3dimensional conformal therapy, 2-dimensional external beam radiotherapy, or brachytherapy was fairly uniform across all socioeconomic classes. IMRT is intensity-modulated radiotherapy. Model was adjusted for age, race, comorbidity, and tumor grade and stage. \*\*p<0.001, omnibus Wald test