S1 Table. Current and historical National health insurance coverage of proton beam therapy in Korea

| | Type of disease |
|--------------------|---|
| Before April, 2011 | None |
| April, 2011 | Among pediatric tumor |
| | A. Brain tumor |
| | B. Head and neck malignancy |
| | C. Central nervous system tumor |
| September, 2015 | A. Pediatric tumor |
| | B. Re-irradiation therapy |
| | C. Brain, skull base and spinal tract tumor |
| | D. Head and neck malignancies – include eye tumor |
| | E. Thoracic malignancies – include malignancies in lung, esophagus, |
| | mediastinal lesion and etc., exclude breast cancer |
| | F. Abdominal malignancies – include liver, biliary tract, pancreas, |
| | retroperitoneal lesion and etc. |