CareSource Rxinnovations

PHARMACY POLICY STATEMENT
Marketplace

DRUG NAME	Yescarta (axicabtagene ciloleucel)
BILLING CODE	Q2041
BENEFIT TYPE	Medical
SITE OF SERVICE ALLOWED	Outpatient/Inpatient Hospital
STATUS	Prior Authorization Required

Yescarta is a CD19-directed genetically modified autologous T cell immunotherapy indicated for the treatment of: 1) Adult patients with large B-cell lymphoma that is refractory to first-line chemoimmunotherapy or that relapses within 12 months of first-line chemoimmunotherapy; and 2) Adult patients with relapsed or refractory large B-cell lymphoma after two or more lines of systemic therapy, including diffuse large B-cell lymphoma (DLBCL) not otherwise specified, primary mediastinal large B-cell lymphoma, high grade B-cell lymphoma, and DLBCL arising from follicular lymphoma; and 3) Adult patients with relapsed or refractory follicular lymphoma (FL) after two or more lines of systemic therapy (accelerated approval).

Yescarta (axicabtagene ciloleucel) will be considered for coverage when the following criteria are met:

Large B-Cell Lymphoma

For **initial** authorization:

1. Member is 18 years of age or older; AND
2. Member has a diagnosis of large B-cell lymphoma; AND
3. Member's disease is refractory or relapsed, defined as one of the following:
   a) No response, partial response, disease progression, or relapse after two or more lines of systemic therapy, including both:
      i) an anti-CD20 monoclonal antibody (e.g., rituximab) unless tumor is CD20-negative and
      ii) a chemotherapy regimen that contains an anthracycline
   b) Relapsed after autologous hematopoietic stem cell transplantation (HSCT)
   c) Primary refractory disease (incomplete response to first line chemoimmunotherapy, including at least an anti-CD20 monoclonal antibody unless tumor is CD20-negative and a chemotherapy regimen that contains an anthracycline)
   d) Relapsed within 12 months (complete remission following first line chemoimmunotherapy that includes at least an anti-CD20 monoclonal antibody unless tumor is CD20-negative and a chemotherapy regimen that contains an anthracycline, followed by relapse); AND
4. Member has an Eastern cooperative oncology group (ECOG) performance status of 0 or 1; AND
5. Member does NOT have any of the following:
   a) Prior allogeneic HSCT
   b) History or presence of primary central nervous system (CNS) lymphoma
   c) Prior CAR-T therapy; AND
6. Member has been screened for hepatitis B virus (HBV), hepatitis C virus (HCV), and human immunodeficiency virus (HIV) prior to collection of cells (negative results must be submitted); AND
7. Healthcare facility/provider has enrolled in the Yescarta and Tecartus REMS program; AND
8. Member's weight is documented for dose calculation.
9. **Dosage allowed/Quantity limit:** 2×10^6 CAR-positive viable T cells per kg body weight, with a maximum of 2×10^8 CAR-positive viable T cells.

If all the above requirements are met, the medication will be approved for 3 months.

For **reauthorization**:
1. Yescarta will not be reauthorized for continued therapy.

Follicular Lymphoma

For **initial** authorization:
1. Member is 18 years of age or older; AND
2. Member has a diagnosis of relapsed or refractory follicular lymphoma; AND
3. Member has measurable disease after 2 or more lines of systemic therapy, including the combination of an anti-CD20 monoclonal antibody and an alkylating agent; AND
4. Member has an Eastern cooperative oncology group (ECOG) performance status of 0 or 1; AND
5. Member does NOT have any of the following:
   a) Prior allogeneic HSCT
   b) History or presence of primary central nervous system (CNS) lymphoma
   c) Prior CAR-T therapy; AND
6. Member has been screened for hepatitis B virus (HBV), hepatitis C virus (HCV), and human immunodeficiency virus (HIV) prior to collection of cells (negative results must be submitted); AND
7. Healthcare facility/provider has enrolled in the Yescarta and Tecartus REMS program; AND
8. Member's weight is documented for dose calculation.
9. **Dosage allowed/Quantity limit:** 2×10^6 CAR-positive viable T cells per kg body weight, with a maximum of 2×10^8 CAR-positive viable T cells.

If all the above requirements are met, the medication will be approved for 3 months.

For **reauthorization**:
1. Yescarta will not be reauthorized for continued therapy.

CareSource considers Yescarta (axicabtagene ciloleucel) not medically necessary for the treatment of conditions that are not listed in this document. For any other indication, please refer to the Off-Label policy.

DATE	ACTION/DESCRIPTION
10/24/2017	New policy for Yescarta created.
08/27/2018	Criteria expanded for member's disease history requirement.
08/04/2020	Defined age 18 or older for adults. Specified trial requirement for 2 or more lines of chemo or relapsed after autologous stem cell transplant. Removed pre-treatment regimens because they are already addressed in REMS. Required screening results for active infections. Removed hypersensitivity to aminoglycoside requirement, CNS disorders, and other forms of malignancy from exclusion list. Added prior CAR-T treatment, life expectancy to exclusion list. Updated the name of REMS program.
05/19/2021	Added criteria for new indication of follicular lymphoma. Large B-Cell Lymphoma: Removed life expectancy restriction. Added ECOG score. Added "partial response" to 3a per NCCN slide BCEL-7.
05/05/2022	Transferred to new template. Updated references. Added documentation of weight. Modified large B cell criteria to accommodate label expansion to include 2nd line use. Removed list of large B cell lymphoma subtypes.

References:

1. Yescarta [package insert]. Santa Monica, CA; Kite Pharma, Inc., April 2022.
2. ClinicalTrials.gov. Identifier NCT02348216. Safety and Efficacy of KTE-C19 in Adults With Refractory Aggressive Non-Hodgkin Lymphoma (ZUMA-1). Available at https://clinicaltrials.gov/ct2/show/NCT02348216.
3. National Comprehensive Cancer Network. B-Cell Lymphomas (Version 3.2022). https://www.nccn.org/professionals/physician_gls/pdf/b-cell.pdf. Accessed May 5, 2022.
4. Neelapu SS, et al. Axicabtagene ciloleucel CAR T-cell therapy in refractory large B-cell lymphoma. N Engl J Med. 2017;377(26):2531-2544.
5. A Phase 2 Multicenter Study of Axicabtagene Ciloleucel in Subjects With Relapsed/Refractory Indolent Non-Hodgkin Lymphoma (ZUMA-5). ClinicalTrials.gov identifier: NCT03105336. Updated May 17, 2021. Accessed May 19, 2021. https://clinicaltrials.gov/ct2/show/NCT03105336.
6. Locke FL, Miklos DB, Jacobson CA, et al. Axicabtagene Ciloleucel as Second-Line Therapy for Large B-Cell Lymphoma. *N Engl J Med*. 2022;386(7):640-654. doi:10.1056/NEJMoa2116133
7. Jacobson C, Chavez JC, Sehgal AR, et al. Primary analysis of zuma-5: a phase 2 study of axicabtagene ciloleucel (Axi-Cel) in patients with relapsed/refractory (R/R) indolent non-hodgkin lymphoma (iNHL). Blood. 2020;136(suppl 1):40-41. [Abstract 623 from ASH 2020 annual meeting].

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