

| Market Applicability | | | | | | | |
|----------------------|----|----|----|----|----|----|----|
| Market | DC | GA | KY | MD | NJ | NY | WA |
| Applicable | X | X | X | X | X | X | NA |

Zevalin (ibritumomab tiuxetan)

| Override(s) | Approval Duration |
|---------------------|-------------------|
| Prior Authorization | 1 year |

| Medications |
|---|
| Zevalin (ibritumomab tiuxetan) (Y-90) Intravenous Kit |

APPROVAL CRITERIA

Requests for Zevalin (ibritumomab tiuxetan) may be approved if the following criteria are met:

- I. Individual has a diagnosis of one the following:
 - A. CD20+ relapsed or refractory, low-grade or follicular B-cell non-Hodgkin's Lymphoma (NHL); **OR**
 - B. Previously untreated CD20+ follicular NHL who achieve a partial or complete response to first-line chemotherapy.

Requests for Zevalin (ibritumomab tiuxetan) may not be approved for the following:

- I. Individually or in combination with other forms of irradiation or chemotherapy when the criteria above are not met; **OR**
- II. As a repeat course of treatment; **OR**
- III. As part of CD20+ lymphoma pre-transplant conditioning regimen.

| State Specific Mandates | | |
|-------------------------|----------------|---|
| State name | Date effective | Mandate details (including specific bill if applicable) |
| N/A | N/A | N/A |

Key References:

1. DrugPoints® System [electronic version]. Truven Health Analytics, Greenwood Village, CO. Updated periodically.
2. Lexi-Comp ONLINE™ with AHFS™, Hudson, Ohio: Lexi-Comp, Inc.; 2019; Updated periodically.

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New Program Date 01/17/2020

This policy does not apply to health plans or member categories that do not have pharmacy benefits, nor does it apply to Medicare. Note that market specific restrictions or transition-of-care benefit limitations may apply. CRX-ALL-0489-20

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3. Lutathera® (lutetium Lu 177 dotatate) [product information]. Giacosa (TO), Italy. January 2018.
4. NCCN Clinical Practice Guidelines in Oncology™. © 2019 National Comprehensive Cancer Network, Inc. For additional information visit the NCCN website: <http://www.nccn.org/index.asp>. Accessed on April 12, 2019.
 - a. B-Cell Lymphomas. V2.2019. Revised March 6, 2019.
5. Zevalin® (ibritumomab tiuxetan) [product information]. Irvine, CA: Spectrum Pharmaceuticals, Inc. December 2018.

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