

# Kadcyla (ado-trastuzumab emtansine)

Override(s)	Approval Duration
Prior Authorization	1 year

Medications
Kadcyla (ado-trastuzumab emtansine)

## **APPROVAL CRITERIA**

Requests for Kadcyla (ado-trastuzumab emtansine) may be approved if the following criteria are met:

- I. Individual has a diagnosis of HER2-positive (HER2+) breast cancer (NCCN 1) confirmed by one of the following:

A. Immunohistochemistry (IHC) is 3 +;

**OR**

B. In situ hybridization (ISH) positive;

**AND**

C. Used in one of the following ways:

1. Individual has early breast cancer; **AND**

a. Individual is using as a single agent; **AND**

b. Individual is using as adjuvant treatment of early non-metastatic breast cancer for residual invasive disease in the breast or axilla after surgery after receiving at least 6 cycles (16 weeks) of neoadjuvant therapy containing a taxane (with or without anthracycline) and trastuzumab (or trastuzumab biosimilars);

**OR**

2. Individual has metastatic breast cancer disease; **AND**

a. Individual is using as a single agent; **AND**

b. Individual has previously received trastuzumab (or trastuzumab biosimilars) and a taxane, separately or in combination; **AND**

c. Individual has either received prior therapy for metastatic disease or developed disease recurrence during or within 6 months of completing adjuvant therapy;

**OR**

- II. Individual has a diagnosis of limited or extensive brain metastases with HER2-positive breast cancer; **AND**

A. Using as initial or primary treatment in asymptomatic disease; **OR**

B. As treatment for recurrent/relapsed disease with stable systemic disease or reasonable systemic treatment options;

**OR**

- III. Individual has a diagnosis of recurrent HER2+ salivary gland tumors (NCCN 2A); **AND**

- C. Individual has had prior anti-HER2+ therapy (e.g. trastuzumab or trasztuzumab biosimilars) (Clinical judgement); **AND**
- D. Using as single-agent systemic therapy.

Requests for Kadcyra (ado-trastuzumab) may not be approved for the following:

- I. When Kadcyra (ado-trastuzumab emtansine) is used in combination with other targeted biologic agents or chemotherapy agents; **OR**
- II. When the above criteria are not met and for all other indications.

#### **Key References:**

1. Clinical Pharmacology [database online]. Tampa, FL: Gold Standard, Inc.: 2022. URL: <http://www.clinicalpharmacology.com>. Updated periodically.
2. DailyMed. Package inserts. U.S. National Library of Medicine, National Institutes of Health website. <http://dailymed.nlm.nih.gov/dailymed/about.cfm>. Accessed: January 18, 2022.
3. DrugPoints® System [electronic version]. Truven Health Analytics, Greenwood Village, CO. Updated periodically.
4. Lexi-Comp ONLINE™ with AHFS™, Hudson, Ohio: Lexi-Comp, Inc.; 2022; Updated periodically.
5. Li BT, Shen R, Buonocore D, et al. Ado-trastuzumab emtansine in patients with HER2 mutant lung cancers. Results from a phase II basket trial. J.Clin Oncol 2018;36:2532-2537.
6. NCCN Clinical Practice Guidelines in Oncology™. © 2021 National Comprehensive Cancer Network, Inc. For additional information visit the NCCN website: <http://www.nccn.org/index.asp>. Accessed on January 18, 2022.
  - a. Breast Cancer. V2.2022. Revised December 20, 2021.
  - b. Central Nervous System Cancer. V2.2021. Revised September 8, 2021.
  - c. Head and Neck Cancers. V1.2022. Revised December 8, 2021.
  - d. Non-Small Cell Lung Cancer. V1.2022. Revised December 7, 2021.

Federal and state laws or requirements, contract language, and Plan utilization management programs or policies may take precedence over the application of this clinical criteria.

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