

Erbitux (cetuximab)

Override(s)	Approval Duration
Prior Authorization	1 year

Medications
Erbitux (cetuximab)

APPROVAL CRITERIA:

Requests for Erbitux (cetuximab) may be approved if the following criteria are met:

- I. Individual has a diagnosis of colon, rectal, colorectal, appendix or anal adenocarcinoma and the following criteria are met (NCCN 2A):
 - A. Individual has advanced or metastatic disease; **AND**
 - B. Extended RAS gene mutation testing is confirmed and the tumor is determined to be RAS wild-type⁺; **AND**
 - C. Cetuximab is used as a single agent or as part of combination therapy; **AND**
 - D. Individual has not received prior treatment with panitumumab^{*}; **AND**
 - E. Cetuximab is not being used in combination with anti-VEGF agents (bevacizumab, ziv-aflibercept, or ramucirumab); **AND**
 - F. Cetuximab is used in a single line of therapy^{**};

***Note:** RAS wild-type means that the KRAS and NRAS genes are normal or lacking mutations.

OR

- II. Individual has a diagnosis of colon, rectal, colorectal, appendix or anal adenocarcinoma and the following are met (NCCN 2A):
 - A. Individual has advanced or metastatic disease; **AND**
 - B. Gene mutation testing is confirmed, and the tumor is determined to be BRAF wild-type ⁺⁺; **AND**
 - C. Individual is being treated for left-sided only tumors; **AND**
 - D. Cetuximab is used as a single agent or as part of combination therapy; **AND**
 - E. Individual has not received prior treatment with panitumumab^{*}; **AND**
 - F. Cetuximab is not used in combination with anti-VEGF agents (bevacizumab, ziv-aflibercept, or ramucirumab); **AND**
 - G. Cetuximab is used in a single line of therapy ^{**};

++Note: BRAF wild-type means that the BRAF gene is normal or lacking mutations.

OR

- III. Individual has a diagnosis of unresectable, advanced, or metastatic colorectal cancer and the following are met (Label, NCCN 2A):
 - A. Individual has BRAF V600E mutation with test results confirmed; **AND**
 - B. Cetuximab is used in combination with encorafenib; **AND**

- C. Individual has demonstrated disease progression after one or more prior lines of systemic therapy; **AND**
- D. Individual has not received prior treatment with panitumumab*; **AND**
- E. Cetuximab is not used in combination with anti-VEGF agents (bevacizumab, ziv-aflibercept, or ramucirumab); **AND**
- F. Cetuximab is used in a single line of therapy **;

OR

- IV. Individual has a diagnosis of squamous cell carcinoma of head and neck (SCCHN), and the following criteria are met:
 - A. Individual has not received prior treatment with panitumumab*; **AND**
 - B. Cetuximab is not being used in combination with anti-VEGF agents (bevacizumab, ziv-aflibercept, or ramucirumab); **AND**
 - C. Cetuximab is used in a single line of therapy**;
 - D. Cetuximab is used in one of the following indications:
 - 1. In combination with radiation therapy, for the treatment of locally or regionally advanced disease; **OR**
 - 2. As a single agent for the treatment of individuals with recurrent or metastatic disease for whom prior platinum-based therapy has failed **OR**
 - 3. In combination with platinum-based therapy with 5-FU (fluorouracil) as first-line treatment for individuals with recurrent locoregional disease or metastatic SCCHN; **OR**
 - 4. As a single agent or in combination therapy with or without radiation for **any** of the following indications (NCCN 2A):
 - a. Unresectable locoregional recurrence; **OR**
 - b. Second primary in individuals who have received prior radiation therapy; **OR**
 - c. Resectable locoregional recurrence in individuals who have not received prior radiation therapy; **OR**
 - d. Distant metastases;

OR

- V. Individual has a diagnosis of squamous cell skin carcinoma, and the following criteria are met (NCCN 2A):
 - A. Individual has unresectable or locally advanced disease, regional recurrence, or distant metastatic disease; **AND**
 - B. Individual has not received prior treatment with panitumumab*; **AND**
 - C. Cetuximab is not used in combination with anti-VEGF agents (bevacizumab, ziv-aflibercept, or ramucirumab); **AND**
 - D. Cetuximab is used in a single line of therapy**

***Note:** A course of panitumumab discontinued because of adverse reaction, not progressive disease, is not considered prior treatment.

****Note:** If cetuximab is recommended as initial therapy, it should not be used in second or subsequent lines of therapy.

Requests for Erbitux (cetuximab) may **not** be approved for the following:

- I. All other indications not included above; **OR**
- II. In combination with other monoclonal antibodies; **OR**

- III. Use as adjuvant therapy after resection for colon cancer; **OR**
- IV. Treatment of squamous cell anal carcinoma; **OR**
- V. Treatment of non-small cell lung cancer.

Note:

Erbix has a black box warning for infusion reactions and cardiopulmonary arrest. Erbitux can cause serious and fatal infusion reactions; immediately interrupt and permanently discontinue for serious infusion reaction. Cardiopulmonary arrest or sudden death occurred in patients with SCCHN receiving Erbitux with radiation therapy or a cetuximab product with platinum-based therapy and fluorouracil. Monitor serum electrolytes, including serum magnesium, potassium, and calcium, during and after Erbitux administration.

Key References:

1. Alberts SR, Sargent DJ, Nair S, et al. Effect of oxaliplatin, fluorouracil, and leucovorin with or without cetuximab on survival among patients with resected stage III colon cancer. *JAMA*. 2012; 307(13):1383-1393.
2. Carthon BC, Ng CS, Pettaway CA, Pagliaro LC. Epidermal growth factor receptor-targeted therapy in locally advanced or metastatic squamous cell carcinoma of the penis. *BJU Int*. 2014; 113(6):871-877.
3. Clinical Pharmacology [database online]. Tampa, FL: Gold Standard, Inc.; 2021. URL: <http://www.clinicalpharmacology.com>. Updated periodically.
4. DailyMed. Package inserts. U.S. National Library of Medicine, National Institutes of Health website. <http://dailymed.nlm.nih.gov/dailymed/about.cfm>. Accessed: April 12, 2022.
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6. Hecht JR, Mitchell E, Chidiac T, et al. A randomized phase IIIB trial of chemotherapy, bevacizumab, and panitumumab compared with chemotherapy and bevacizumab alone for metastatic colorectal cancer. *J Clin Oncol*. 2009; 27(5):672-680.
7. Janjigian YY, Smit EF, Groen HJ, et al. Dual inhibition of EGFR with afatinib and cetuximab in kinase inhibitor-resistant EGFR-mutant lung cancer with and without T790M mutations. *Cancer Discov*. 2014; 4(9):1036-1045.
8. Lexi-Comp ONLINE™ with AHFS™, Hudson, Ohio: Lexi-Comp, Inc.; 2022; Updated periodically.
9. Lynch TJ, Patel T, Dreisbach L, et al. Cetuximab and first-line taxane/carboplatin chemotherapy in advanced non-small-cell lung cancer: results of the randomized multicenter phase III trial BMS099. *J Clin Oncol*. 2010; 28(6):911-917.
10. Tol J, Koopman M, Cats A, et al. Chemotherapy, bevacizumab, and cetuximab in metastatic colorectal cancer. *N Engl J Med*. 2009; 360(6):563-572.
11. Pirker R, Pereira JR, von Pawel J, et al. EGFR expression as a predictor of survival for first-line chemotherapy plus cetuximab in patients with advanced non-small-cell lung cancer: analysis of data from the phase 3 FLEX study. *Lancet Oncol*. 2012; 13(1):33-42.
12. NCCN Clinical Practice Guidelines in Oncology™. © 2020 National Comprehensive Cancer Network, Inc. For additional information visit the NCCN website: <http://www.nccn.org/index.asp>. Accessed April 2022.
 - a. Colon Cancer. V1.2022. Revised February 25, 2022.
 - b. Head and Neck Cancers. V1.2022. Revised December 8, 2021.
 - c. Non-Small Cell Lung Cancer. V3.2022. Revised March 16, 2022.
 - d. Penile Cancer. V2. 2022. Revised January 26, 2022.
 - e. Rectal Cancer. V1. 2022. Revised February 25, 2022.
 - f. Squamous Cell Skin Cancer. V1.2022. Revised November 17, 2021.
 - g. Small Bowel Adenocarcinoma. V1.2022. Revised March 9, 2022.

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