

Erbitux® (cetuximab) (Intravenous)

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06/2024

I. Length of Authorization ^{1,30}

Coverage will be provided for 6 months and may be renewed, (unless otherwise specified).

Head and Neck Cancer

• <u>In combination with radiation therapy</u>: Coverage will be provided starting one week prior and for the duration of radiation therapy (up to 8 total weeks).

II. Dosing Limits

A. Quantity Limit (max daily dose) [NDC Unit]:

- Erbitux 100 mg/50 mL solution for injection single-dose vial: 1 vial every 7 days
- Erbitux 200 mg/100 mL solution for injection single-dose vial: 5 vials x 1 dose, then 3 vials every 7 days

B. Max Units (per dose and over time) [HCPCS Unit]:

- Colorectal Cancer & Head and Neck Cancer: 280 billable units every 28 days
- Squamous Cell Skin Cancer
 - Loading Dose: 100 billable units for 1 dose
 - Maintenance Dose: 60 billable units every 7 days

III. Initial Approval Criteria ¹

Coverage is provided in the following conditions:

Patient is at least 18 years of age; AND

Colorectal Cancer (CRC) † ‡ 1,2,12,13,32,17,19,2e,5e-8e,10e-12e,15e

Will not be used as part of an adjuvant treatment regimen; AND



- Patient has not been previously treated with cetuximab or panitumumab; AND
- Will not be used in combination with an anti-VEGF agent (e.g., bevacizumab, ramucirumab);
 AND
 - Patient has both KRAS and NRAS mutation negative (wild-type) and BRAF V600E mutation negative (wild-type) disease as determined by an FDA-approved or CLIA-compliant testv;
 AND
 - Used as primary treatment for metastatic or unresectable (or medically inoperable)
 disease §; AND
 - Used in combination with FOLFIRI †; OR
 - Used in combination with CapeOX or FOLFOX**; AND
 - Patient has proficient mismatch repair/microsatellite-stable (pMMR/MSS) disease; OR
 - Patient has deficient mismatch repair/microsatellite instability-high (dMMR/MSI-H) disease or polymerase epsilon/delta (POLE/POLD1) mutation; AND
 - Patient is not a candidate for or has progressed on checkpoint inhibitor immunotherapy; OR
 - Used in combination with irinotecan; AND
 - Patient previously received FOLFOX or CapeOX within the past 12 months; AND
 - Patient has proficient mismatch repair/microsatellite-stable (pMMR/MSS) disease; OR
 - Used as primary treatment for T3, N Any; T1-2, N1-2; T4, N Any rectal cancer; AND
 - Used in combination with CapeOX, FOLFOX, or FOLFIRI; AND
 - Used if resection is contraindicated following total neoadjuvant therapy; AND
 - Patient has proficient mismatch repair/microsatellite-stable (pMMR/MSS) disease; OR
 - Patient has deficient mismatch repair/microsatellite instability-high (dMMR/MSI-H) disease or polymerase epsilon/delta (POLE/POLD1) mutation; AND
 - Patient is not a candidate for or has progressed on checkpoint inhibitor immunotherapy; OR
 - Used if resection is contraindicated following neoadjuvant/definitive immunotherapy; AND
 - Patient has deficient mismatch repair/microsatellite instability-high (dMMR/MSI-H) disease; OR
 - Used as subsequent therapy for advanced or metastatic disease; AND



- Used as a single agent; AND
 - Patient has oxaliplatin- and irinotecan-refractory disease †; OR
 - Patient has irinotecan-intolerant disease †; OR
- Used in combination with irinotecan; AND
 - Patient has irinotecan-refractory disease †; OR
 - Patient has oxaliplatin-refractory disease or oxaliplatin- and irinotecanrefractory disease §; AND
 - Patient has proficient mismatch repair/microsatellite-stable (pMMR/MSS) disease; OR
 - Patient has deficient mismatch repair/microsatellite instability-high (dMMR/MSI-H) disease or polymerase epsilon/delta (POLE/POLD1) mutation; AND
 - Patient is not a candidate for or has progressed on checkpoint inhibitor immunotherapy; OR
- Used in combination with FOLFIRI for oxaliplatin-refractory disease §**; AND
 - Patient has proficient mismatch repair/microsatellite-stable (pMMR/MSS) disease; OR
 - Patient has deficient mismatch repair/microsatellite instability-high (dMMR/MSI-H) disease or polymerase epsilon/delta (POLE/POLD1) mutation; AND
 - Patient is not a candidate for or has progressed on checkpoint inhibitor immunotherapy; OR
- Used in combination with FOLFOX or CapeOX for irinotecan-refractory disease §**;
 AND
 - Patient has proficient mismatch repair/microsatellite-stable (pMMR/MSS) disease; OR
 - Patient has deficient mismatch repair/microsatellite instability-high (dMMR/MSI-H) disease or polymerase epsilon/delta (POLE/POLD1) mutation; AND
 - Patient is not a candidate for or has progressed on checkpoint inhibitor immunotherapy; OR
- Patient has BRAF V600E mutation positive disease as determined by an FDA-approved or CLIA-compliant testv †; AND
 - Used in combination with encorafenib; AND
 - Used as initial treatment for unresectable metastatic disease after previous adjuvant FOLFOX or CapeOX within the past 12 months; AND



- Patient has proficient mismatch repair/microsatellite-stable (pMMR/MSS) disease; OR
- Used as subsequent therapy for progression after at least one prior line of treatment in the advanced or metastatic disease setting; OR
- Patient has KRAS G12C mutation positive disease as determined by an FDA-approved or CLIA-compliant test ◆ ‡; AND
 - Used in combination with adagrasib; AND
 - Patient has no available treatment options (or is ineligible or declined treatment); AND
 - Used as initial treatment for unresectable metastatic disease after previous FOLFOX or CapeOX within the past 12 months; AND
 - Patient has proficient mismatch repair/microsatellite-stable (pMMR/MSS) disease; OR
 - Used as subsequent therapy for progression of advanced or metastatic disease;
 AND
 - Patient has proficient mismatch repair/microsatellite-stable (pMMR/MSS) disease; OR
 - Patient has deficient mismatch repair/microsatellite instability-high (dMMR/MSI-H) disease or polymerase epsilon/delta (POLE/POLD1) mutation; AND
 - Patient is not a candidate for or has progressed on checkpoint inhibitor immunotherapy

§ Colon cancer patients must have left-sided tumors only.

Head and Neck Cancer † ‡ Φ ^{1,2,14,16,25,29-31,17e-23e,25e-29e}

- Patient has squamous cell carcinoma; AND
 - Used in combination with radiation as a single agent †; OR
 - Used as first-line therapy; AND
 - Used in combination with fluorouracil and either cisplatin or carboplatin for unresectable, recurrent/persistent, or metastatic disease (non-nasopharyngeal) †; OR
 - Used in combination with cisplatin for very advanced head and neck cancers* (non-nasopharyngeal) AND PS 0-1; OR
 - Used in combination with docetaxel and either cisplatin or carboplatin for very advanced head and neck cancers* (non-nasopharyngeal) AND PS 0-1; OR
 - Used in combination with paclitaxel with or without platinum-based therapy for very advanced head and neck cancers* (non-nasopharyngeal) AND PS 0-1; OR

^{**}May also be used for progression on non-intensive therapy, except if received previous fluoropyrimidine, with improvement in functional status.



- Used in combination with nivolumab for very advanced head and neck cancer* (non-nasopharyngeal) AND PS 0-1; OR
- Used in combination with pembrolizumab for very advanced head and neck cancer* (non-nasopharyngeal) AND PS 0-1; AND
 - Patient has platinum-resistant disease or is platinum-ineligible; OR
- Used as subsequent therapy; AND
 - Used as a single agent for unresectable, recurrent/persistent, or metastatic disease after failure on platinum-based therapy †; OR
 - Used in combination with pembrolizumab for very advanced head and neck cancer* (non-nasopharyngeal) AND PS 0-1; AND
 - Patient has platinum-resistant disease or is platinum-ineligible

Squamous Cell Skin Cancer ‡ 2,21,27

- Used as a single agent; AND
- Patient is not a candidate for or has progressed on immune checkpoint inhibitors AND clinical trials; AND
- Patient is chemotherapy-naive; AND
 - Patient has locally advanced or unresectable disease; AND
 - Used as primary treatment if curative surgery and curative radiation therapy (RT) are not feasible; OR
 - Used as additional treatment if positive surgical margins and curative surgery and curative RT are not feasible; OR
 - Patient has regional disease that is unresectable, inoperable, or incompletely resected if curative RT is not feasible; OR
 - o Patient has regional recurrence or distant metastatic disease

Preferred therapies and recommendations are determined by review of clinical evidence. NCCN category of recommendation is taken into account as a component of this review. Regimens deemed equally efficacious (i.e., those having the same NCCN categorization) are considered to be therapeutically equivalent.

v If confirmed using an FDA approved assay – http://www.fda.gov/companiondiagnostics

† FDA Approved Indication(s); ‡ Compendia Recommended Indication(s); Φ Orphan Drug

^{*} Very Advanced Head and Neck Cancers include: newly diagnosed locally advanced T4b [M0] disease; newly diagnosed unresectable regional nodal disease, typically N3; metastatic disease at initial presentation [M1]; or recurrent or persistent disease.



IV. Renewal Criteria 1,30

Coverage may be renewed based upon the following criteria:

- Patient continues to meet the indication-specific relevant criteria such as concomitant therapy requirements (not including prerequisite therapy), performance status, etc. identified in section III; AND
- Disease response with treatment as defined by stabilization of disease or decrease in size of tumor or tumor spread; AND
- Absence of unacceptable toxicity from the drug. Examples of unacceptable toxicity include: severe infusion reactions/anaphylactic reactions, cardiopulmonary arrest, pulmonary toxicity/interstitial lung disease, dermatologic toxicity, hypomagnesemia/electrolyte abnormalities, etc.

Head and Neck Cancer (in combination with radiation therapy)

• Patient has not exceeded a maximum of 8 weeks of therapy

V. Dosage/Administration ^{1,12,13,20-23,29-35}

Indication	Dose	
Colorectal Cancer	400 mg/m² loading dose intravenously, then 250 mg/m² intravenously every 7 days until	
	disease progression or unacceptable toxicity	
	OR	
	500 mg/m² intravenously every 14 days until disease progression or unacceptable toxicity	
Head and Neck	In combination with radiation therapy:	
Cancer	400 mg/m² loading dose intravenously 1 week prior to radiation therapy, then 250 mg/m²	
	intravenously every 7 days for the duration of radiation therapy (up to 8 total weeks of	
	therapy)	
	Monotherapy or in combination with platinum-based therapy:	
	400 mg/m² loading dose intravenously, then 250 mg/m² intravenously every 7 days until	
	disease progression or unacceptable toxicity	
	OR	
	500 mg/m² intravenously every 14 days until disease progression or unacceptable toxicity	
	In combination with nivolumab:	
	500 mg/m² intravenously every 14 days until disease progression or unacceptable toxicity	
	In combination with pembrolizumab:	
	400 mg/m² loading dose intravenously, then 250 mg/m² intravenously every 7 days until	
	disease progression or unacceptable toxicity	
Squamous Cell Skin	400 mg/m² loading dose intravenously, then 250 mg/m² intravenously every 7 days until	
Cancer	disease progression or unacceptable toxicity	



VI. Billing Code/Availability Information

HCPCS Code:

J9055 – Injection, cetuximab, 10 mg; 1 billable unit = 10 mg

NDC(s):

- Erbitux 100 mg/50 mL single-dose vial, solution for injection: 66733-0948-xx
- Erbitux 200 mg/100 mL single-dose vial, solution for injection: 66733-0958-xx

VII. References (STANDARD)

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- 25. Referenced with permission from the NCCN Drugs & Biologics Compendium (NCCN Compendium®) Head and Neck Cancers, Version 5.2024. National Comprehensive Cancer Network, 2024. The NCCN Compendium® is a derivative work of the NCCN Guidelines®. NATIONAL COMPREHENSIVE CANCER NETWORK®, NCCN®, and NCCN GUIDELINES® are trademarks owned by the National Comprehensive Cancer Network, Inc. To view the most recent and complete version of the Compendium, go online to NCCN.org. Accessed April 2024.
- 26. Referenced with permission from the NCCN Drugs & Biologics Compendium (NCCN Compendium®) Penile Cancer. Version 1.2024. National Comprehensive Cancer Network, 2024. The NCCN Compendium® is a derivative work of the NCCN Guidelines®. NATIONAL COMPREHENSIVE CANCER NETWORK®, NCCN®, and NCCN GUIDELINES® are trademarks owned by the National Comprehensive Cancer Network, Inc. To view the most recent and complete version of the Compendium, go online to NCCN.org. Accessed April 2024.
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Appendix 1 – Covered Diagnosis Codes

ICD-10	ICD-10 Description	
C00.0	Malignant neoplasm of external upper lip	
C00.1	Malignant neoplasm of external lower lip	
C00.2	Malignant neoplasm of external lip, unspecified	
C00.3	Malignant neoplasm of upper lip, inner aspect	
C00.4	Malignant neoplasm of lower lip, inner aspect	
C00.5	Malignant neoplasm of lip, unspecified, inner aspect	
C00.6	Malignant neoplasm of commissure of lip, unspecified	
C00.8	Malignant neoplasm of overlapping sites of lip	
C00.9	Malignant neoplasm of lip, unspecified	
C01	Malignant neoplasm of base of tongue	
C02.0	Malignant neoplasm of dorsal surface of tongue	
C02.1	Malignant neoplasm of border of tongue	
C02.2	Malignant neoplasm of ventral surface of tongue	
C02.3	Malignant neoplasm of anterior two-thirds of tongue, part unspecified	
C02.4	Malignant neoplasm of lingual tonsil	
C02.8	Malignant neoplasm of overlapping sites of tongue	
C02.9	Malignant neoplasm of tongue, unspecified	
C03.0	Malignant neoplasm of upper gum	
C03.1	Malignant neoplasm of lower gum	
C03.9	Malignant neoplasm of gum, unspecified	
C04.0	Malignant neoplasm of anterior floor of mouth	
C04.1	Malignant neoplasm of lateral floor of mouth	
C04.8	Malignant neoplasm of overlapping sites of floor of mouth	
C04.9	Malignant neoplasm of floor of mouth, unspecified	
C05.0	Malignant neoplasm of hard palate	
C05.1	Malignant neoplasm of soft palate	
C05.8	Malignant neoplasm of overlapping sites of palate	
C05.9	Malignant neoplasm of palate, unspecified	
C06.0	Malignant neoplasm of cheek mucosa	
C06.2	Malignant neoplasm of retromolar area	
C06.80	Malignant neoplasm of overlapping sites of unspecified parts of mouth	
C06.89	Malignant neoplasm of overlapping sites of other parts of mouth	
C06.9	Malignant neoplasm of mouth, unspecified	
C09.0	Malignant neoplasm of tonsillar fossa	
C09.1	Malignant neoplasm of tonsillar pillar (anterior) (posterior)	



ICD-10	ICD-10 Description	
C09.8	Malignant neoplasm of overlapping sites of tonsil	
C09.9	Malignant neoplasm of tonsil, unspecified	
C10.0	Malignant neoplasm of vallecula	
C10.1	Malignant neoplasm of anterior surface of epiglottis	
C10.2	Malignant neoplasm of lateral wall of oropharynx	
C10.3	Malignant neoplasm of posterior wall of oropharynx	
C10.4	Malignant neoplasm of branchial cleft	
C10.8	Malignant neoplasm of overlapping sites of oropharynx	
C10.9	Malignant neoplasm of oropharynx, unspecified	
C11.0	Malignant neoplasm of superior wall of nasopharynx	
C11.1	Malignant neoplasm of posterior wall of nasopharynx	
C11.2	Malignant neoplasm of lateral wall of nasopharynx	
C11.3	Malignant neoplasm of anterior wall of nasopharynx	
C11.8	Malignant neoplasm of overlapping sites of nasopharynx	
C11.9	Malignant neoplasm of nasopharynx, unspecified	
C12	Malignant neoplasm of pyriform sinus	
C13.0	Malignant neoplasm of postcricoid region	
C13.1	Malignant neoplasm of aryepiglottic fold, hypopharyngeal aspect	
C13.2	Malignant neoplasm of posterior wall of hypopharynx	
C13.8	Malignant neoplasm of overlapping sites of hypopharynx	
C13.9	Malignant neoplasm of hypopharynx, unspecified	
C14.0	Malignant neoplasm of pharynx, unspecified	
C14.2	Malignant neoplasm of Waldeyer's ring	
C14.8	Malignant neoplasm of overlapping sites of lip, oral cavity and pharynx	
C18.0	Malignant neoplasm of cecum	
C18.2	Malignant neoplasm of ascending colon	
C18.3	Malignant neoplasm of hepatic flexure	
C18.4	Malignant neoplasm of transverse colon	
C18.5	Malignant neoplasm of splenic flexure	
C18.6	Malignant neoplasm of descending colon	
C18.7	Malignant neoplasm of sigmoid colon	
C18.8	Malignant neoplasm of overlapping sites of large intestines	
C18.9	Malignant neoplasm of colon, unspecified	
C19	Malignant neoplasm of rectosigmoid junction	
C20	Malignant neoplasm of rectum	
C21.8	Malignant neoplasm of overlapping sites of rectum, anus and anal canal	



ICD-10	ICD-10 Description	
C30.0	Malignant neoplasm of nasal cavity	
C31.0	Malignant neoplasm of maxillary sinus	
C31.1	Malignant neoplasm of ethmoidal sinus	
C32.0	Malignant neoplasm of glottis	
C32.1	Malignant neoplasm of supraglottis	
C32.2	Malignant neoplasm of subglottis	
C32.3	Malignant neoplasm of laryngeal cartilage	
C32.8	Malignant neoplasm of overlapping sites of larynx	
C32.9	Malignant neoplasm of larynx, unspecified	
C44.00	Unspecified malignant neoplasm of skin of lip	
C44.02	Squamous cell carcinoma of skin of lip	
C44.09	Other specified malignant neoplasm of skin of lip	
C44.121	Squamous cell carcinoma of skin of unspecified eyelid, including canthus	
C44.1221	Squamous cell carcinoma of skin of right upper eyelid, including canthus	
C44.1222	Squamous cell carcinoma of skin of right lower eyelid, including canthus	
C44.1291	Squamous cell carcinoma of skin of left upper eyelid, including canthus	
C44.1292	Squamous cell carcinoma of skin of left lower eyelid, including canthus	
C44.221	Squamous cell carcinoma of skin of unspecified ear and external auricular canal	
C44.222	Squamous cell carcinoma of skin of right ear and external auricular canal	
C44.229	Squamous cell carcinoma of skin of left ear and external auricular canal	
C44.320	Squamous cell carcinoma of skin of unspecified parts of face	
C44.321	Squamous cell carcinoma of skin of nose	
C44.329	Squamous cell carcinoma of skin of other parts of face	
C44.42	Squamous cell carcinoma of skin of scalp and neck	
C44.520	Squamous cell carcinoma of anal skin	
C44.521	Squamous cell carcinoma of skin of breast	
C44.529	Squamous cell carcinoma of skin of other part of trunk	
C44.621	Squamous cell carcinoma of skin of unspecified upper limb, including shoulder	
C44.622	Squamous cell carcinoma of skin of right upper limb, including shoulder	
C44.629	Squamous cell carcinoma of skin of left upper limb, including shoulder	
C44.721	Squamous cell carcinoma of skin of unspecified lower limb, including hip	
C44.722	Squamous cell carcinoma of skin of right lower limb, including hip	
C44.729	Squamous cell carcinoma of skin of left lower limb, including hip	
C44.82	Squamous cell carcinoma of overlapping sites of skin	
C44.92	Squamous cell carcinoma of skin, unspecified	
C76.0	Malignant neoplasm of head, face and neck	



ICD-10	ICD-10 Description	
C77.0	Secondary and unspecified malignant neoplasm of lymph nodes of head, face and neck	
C78.00	Secondary malignant neoplasm of unspecified lung	
C78.01	Secondary malignant neoplasm of right lung	
C78.02	Secondary malignant neoplasm of left lung	
C78.6	Secondary malignant neoplasm of retroperitoneum and peritoneum	
C78.7	Secondary malignant neoplasm of liver and intrahepatic bile duct	
D37.01	Neoplasm of uncertain behavior of lip	
D37.02	Neoplasm of uncertain behavior of tongue	
D37.05	Neoplasm of uncertain behavior of pharynx	
D37.09	Neoplasm of uncertain behavior of other specified sites of the oral cavity	
D38.0	Neoplasm of uncertain behavior of larynx	
D38.5	Neoplasm of uncertain behavior of other respiratory organs	
D38.6	Neoplasm of uncertain behavior of respiratory organ, unspecified	
Z85.038	Personal history of other malignant neoplasm of large intestine	

Appendix 2 – Centers for Medicare and Medicaid Services (CMS)

The preceding information is intended for non-Medicare coverage determinations. Medicare coverage for outpatient (Part B) drugs is outlined in the Medicare Benefit Policy Manual (Pub. 100-2), Chapter 15, §50 Drugs and Biologicals. In addition, National Coverage Determinations (NCDs) and/or Local Coverage Determinations (LCDs) may exist and compliance with these policies is required where applicable. Local Coverage Articles (LCAs) may also exist for claims payment purposes or to clarify benefit eligibility under Part B for drugs which may be self-administered. The following link may be used to search for NCD, LCD, or LCA documents: https://www.cms.gov/medicare-coverage-database/search.aspx. Additional indications, including any preceding information, may be applied at the discretion of the health plan.

Medicare Part B Covered Diagnosis Codes (applicable to existing NCD/LCD/LCA): N/A

Medicare Part B Administrative Contractor (MAC) Jurisdictions				
Jurisdiction	Applicable State/US Territory	Contractor		
E (1)	CA, HI, NV, AS, GU, CNMI	Noridian Healthcare Solutions, LLC		
F (2 & 3)	AK, WA, OR, ID, ND, SD, MT, WY, UT, AZ	Noridian Healthcare Solutions, LLC		
5	KS, NE, IA, MO	Wisconsin Physicians Service Insurance Corp (WPS)		
6	MN, WI, IL	National Government Services, Inc. (NGS)		
H (4 & 7)	LA, AR, MS, TX, OK, CO, NM	Novitas Solutions, Inc.		
8	MI, IN	Wisconsin Physicians Service Insurance Corp (WPS)		
N (9)	FL, PR, VI	First Coast Service Options, Inc.		
J (10)	TN, GA, AL	Palmetto GBA		



Medicare Part B Administrative Contractor (MAC) Jurisdictions			
Jurisdiction	Applicable State/US Territory	Contractor	
M (11)	NC, SC, WV, VA (excluding below)	Palmetto GBA	
L (12)	DE, MD, PA, NJ, DC (includes Arlington & Fairfax counties and the city of Alexandria in VA)	Novitas Solutions, Inc.	
K (13 & 14)	NY, CT, MA, RI, VT, ME, NH	National Government Services, Inc. (NGS)	
15	кү, он	CGS Administrators, LLC	