Evolent Clinical Guideline 3005 for Calquence™ (acalabrutinib)

Guideline Number:	Applicable Codes	
Evolent_CG_3005		
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Original Date:	**Last Revised Date:**	**Implementation Date:**
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STATEMENT

Purpose

To define and describe the accepted indications for Calquence (acalabrutinib) usage in the treatment of cancer, including FDA approved indications, and off-label indications.

Evolent is responsible for processing all medication requests from network ordering providers. Medications not authorized by Evolent may be deemed as not approvable and therefore not reimbursable.

The use of this drug must be supported by one of the following: FDA approved product labeling, CMS-approved compendia, National Comprehensive Cancer Network (NCCN), American Society of Clinical Oncology (ASCO) clinical guidelines, or peer-reviewed literature that meets the requirements of the CMS Medicare Benefit Policy Manual Chapter 15.

INDICATIONS

Continuation requests for a not-approvable medication shall be exempt from this Evolent policy provided

- The member has not experienced disease progression on the requested medication AND
- The requested medication was used within the last year without a lapse of more than 30 days of having an active authorization AND
- Additional medication(s) are not being added to the continuation request.

Chronic Lymphocytic Leukemia/Small Lymphocytic Lymphoma (CLL/SLL)

- Calquence (acalabrutinib) may be used as a single agent for first line or subsequent line therapy of CLL/SLL.
- Calquence (acalabrutinib) may be used in combination with Venclexta (venetoclax) as first-line therapy for adult members with CLL/SLL without del(17p) or TP53 mutation.
- NOTE: Calquence (acalabrutinib) + Gazyva (obinutuzumab) is not supported by Evolent Policy for use in CLL. This position is based on results of the randomized trial ELEVATE-TN (see reference below) which failed to show an overall survival advantage for Calquence (acalabrutinib) + Gazyva (obinutuzumab) compared to single agent Calquence (acalabrutinib). Please refer to Evolent alternative agents/regimens recommended by Evolent, including but not limited to regimens available at **Evolent Pathways**.

Mantle Cell Lymphoma

- Calquence (acalabrutinib) may be used as monotherapy in relapsed/refractory Mantle Cell Lymphoma in members who have received one prior chemoimmunotherapy, including a rituximab containing regimen (e.g., RCHOP, RDHAP, BR).

- Calquence (acalabrutinib) may be used in combination with bendamustine and rituximab/rituximab biosimilar for adult members with previously untreated mantle cell lymphoma who are ineligible for autologous hematopoietic stem cell transplantation (HSCT).

CONTRAINDICATIONS/WARNINGS

- None

EXCLUSION CRITERIA

- Disease progression while receiving an acalabrutinib-containing regimen or while receiving another BTK inhibitor [e.g., Imbruvica (ibrutinib) or Brukinsa (zanubrutinib)].
- For the treatment of CLL: concurrent use with an anti-CD20 antibody including any rituximab products or Gazyva (obinutuzumab). Per Evolent Policy, single agent acalabrutinib is as effective as Calquence (acalabrutinib) + Gazyva (obinutuzumab)/other anti-CD 20 antibody.
- Dosing exceeds single dose limit of Calquence (acalabrutinib) 100 mg.
- Treatment exceeds the maximum limit of 60 (100 mg) tablets/month.
- Investigational use of Calquence (acalabrutinib) with an off-label indication that is not sufficient in evidence or is not generally accepted by the medical community. Sufficient evidence that is not supported by CMS recognized compendia or acceptable peer reviewed literature is defined as any of the following:
    - Whether the clinical characteristics of the patient and the cancer are adequately represented in the published evidence.
    - Whether the administered chemotherapy/biologic therapy/immune therapy/targeted therapy/other oncologic therapy regimen is adequately represented in the published evidence.
    - Whether the reported study outcomes represent clinically meaningful outcomes experienced by patients. Generally, the definitions of Clinically Meaningful outcomes are those recommended by ASCO, e.g., Hazard Ratio of less than 0.80 and the recommended survival benefit for OS and PFS should be at least 3 months.
    - Whether the experimental design, considering the drugs and conditions under investigation, is appropriate to address the investigative question. (For example, in some clinical studies, it may be unnecessary or not feasible to use randomization, double blind trials, placebos, or crossover).
    - That non-randomized clinical trials with a significant number of subjects may be a basis for supportive clinical evidence for determining accepted uses of drugs.
    - That case reports are generally considered uncontrolled and anecdotal information and do not provide adequate supportive clinical evidence for determining accepted uses of drugs.
    - That abstracts (including meeting abstracts) without the full article from the approved peer-reviewed journals lack supporting clinical evidence for determining

accepted uses of drugs.

CODING AND STANDARDS

Codes

- J8999 - acalabrutinib

Applicable Lines of Business

☐	CHIP (Children's Health Insurance Program)
☒	Commercial
☒	Exchange/Marketplace
☒	Medicaid
☐	Medicare Advantage

POLICY HISTORY

Date	Summary
March 2026	• Updated CLL/SLL indication section • Updated references
February 2026	• Updated references
February 2025	• Converted to new Evolent guideline template • This guideline replaces UM ONC_1331 Calquence (acalabrutinib) • Added new indication • Updated references
October 2024	• Added new reference • Updated NCH verbiage to Evolent

LEGAL AND COMPLIANCE

Guideline Approval

Committee

Reviewed / Approved by Evolent Specialty Services Clinical Guideline Review Committee

Disclaimer

Evolent Clinical Guidelines do not constitute medical advice. Treating health care professionals are solely responsible for diagnosis, treatment, and medical advice. Evolent uses Clinical Guidelines in accordance with its contractual obligations to provide utilization management. Coverage for services varies for individual members according to the terms of their health care coverage or government program. Individual members' health care coverage may not utilize some Evolent Clinical Guidelines. Evolent clinical guidelines contain guidance that requires prior authorization and service limitations. A list of procedure codes, services or drugs may not be all inclusive and does not imply that a service or drug is a covered or non-covered service or drug. Evolent reserves the right to review and update this Clinical Guideline in its sole discretion. Notice of any changes shall be provided as required by applicable provider agreements and laws or regulations. Members should contact their Plan customer service representative for specific coverage information.

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