New Century Health

Drug Policy:

Yondelis™ (trabectedin)

POLICY NUMBER UM ONC_1290	**SUBJECT** Yondelis™ (trabectedin)		**DEPT/PROGRAM** UM Dept	**PAGE 1 of 3**
DATES COMMITTEE REVIEWED 04/13/16, 02/06/17, 01/29/18, 02/14/18, 02/06/19, 12/11/19, 02/12/20, 11/11/20, 10/13/21, 11/15/21, 05/11/22, 10/12/22, 01/11/23, 02/08/23, 03/08/23, 05/10/23	**APPROVAL DATE** May 10, 2023	**EFFECTIVE DATE** May 26, 2023	**COMMITTEE APPROVAL DATES** 04/13/16, 02/06/17, 01/29/18, 02/14/18, 02/06/19, 12/11/19, 02/12/20, 11/11/20, 10/13/21, 11/15/21, 05/11/22, 10/12/22, 01/11/23, 02/08/23, 03/08/23, 05/10/23	
PRIMARY BUSINESS OWNER: UM		**COMMITTEE/BOARD APPROVAL** Utilization Management Committee		
URAC STANDARDS HUM v8: UM 1-2; UM 2-1	**NCQA STANDARDS** UM 2		**ADDITIONAL AREAS OF IMPACT**	
CMS REQUIREMENTS	**STATE/FEDERAL REQUIREMENTS**		**APPLICABLE LINES OF BUSINESS** Commercial, Exchange, Medicaid	

I. PURPOSE

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

New Century Health (NCH) is responsible for processing all medication requests from network ordering providers. Medications not authorized by NCH 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.

II. INDICATIONS FOR USE/INCLUSION CRITERIA

A. Continuation requests for a not-approvable medication shall be exempt from this NCH policy provided:

1. The requested medication was used within the last year, AND
2. The member has not experienced disease progression and/or no intolerance to the requested medication, AND
3. Additional medication(s) are not being added to the continuation request.

B. Soft Tissue Sarcoma

1. The member has unresectable or metastatic soft tissue sarcoma (Leiomyosarcoma, liposarcoma, and translocation-related sarcomas) AND Yondelis (trabectedin) may be used as monotherapy or in combination with doxorubicin as first line or subsequent therapy.
2. NOTE: Yondelis (trabectedin) is not supported by NCH Policy for the treatment of other soft tissue sarcoma histologies that are not leiomyosarcoma, liposarcoma, and translocation-related sarcomas. This policy position is based on the T-SAR trial which demonstrated no clinically meaningful improvement in overall survival or progression free survival with Yondelis (trabectedin) when compared to best supportive care for patients with advanced translocation-related sarcoma. Please refer to NCH alternative agents/regimens recommended by NCH, including but not limited to regimens available at http://pathways.newcenturyhealth.com.

C. Uterine Sarcoma

1. The member has unresectable or metastatic uterine leiomyosarcoma AND
2. Yondelis (trabectedin) is being used as single agent for members with disease progression with prior anthracycline-based chemotherapy unless there is a contraindication/intolerance with prior anthracycline based therapy.

III. EXCLUSION CRITERIA

A. Yondelis (trabectedin) is being used after disease progression with Yondelis.

B. Dosing exceeds single dose limit of Yondelis (trabectedin) 1.5 mg/m^2.

C. Investigational use of Yondelis (trabectedin) 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:

1. Whether the clinical characteristics of the patient and the cancer are adequately represented in the published evidence.
2. Whether the administered chemotherapy/biologic therapy/immune therapy/targeted therapy/other oncologic therapy regimen is adequately represented in the published evidence.
3. 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.
4. 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).
5. 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.
6. That case reports are generally considered uncontrolled and anecdotal information and do not provide adequate supportive clinical evidence for determining accepted uses of drugs.
7. 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.

IV. MEDICATION MANAGEMENT

A. Please refer to the FDA label/package insert for details regarding these topics.

V. APPROVAL AUTHORITY

A. Review – Utilization Management Department

B. Final Approval – Utilization Management Committee

VI. ATTACHMENTS

A. None

VII. REFERENCES

A. Pautier P, et al. French Sarcoma Group Clinical Trial, Doxorubicin alone versus doxorubicin with trabectedin followed by trabectedin alone as first-line therapy for metastatic or unresectable leiomyosarcoma (LMS-04): a randomised, multicentre, open-label phase 3 trial. Lancet Oncol. 2022 Aug;23(8):1044-1054.

B. Le Cesne A, et al. A randomized phase III trial comparing trabectedin to best supportive care in patients with pre-treated soft tissue sarcoma: T-SAR, a French Sarcoma Group trial. Ann Oncol. 2021 Aug;32(8):1034-1044.

C. Patel S, et al. Overall survival and histology-specific subgroup analyses from a phase 3, randomized controlled study of trabectedin or dacarbazine in patients with advanced liposarcoma or leiomyosarcoma. Cancer. 2019 Aug 1;125(15):2610-2620.

D. Demetri GD, et al. Efficacy and Safety of Trabectedin or Dacarbazine for Metastatic Liposarcoma or Leiomyosarcoma After Failure of Conventional Chemotherapy: Results of a Phase III Randomized Multicenter Clinical Trial. J Clin Oncol. 2016 Mar 10;34(8):786-93.

E. Yondelis prescribing information. Janssen Biotech. Horsham, PA 2020.

F. Clinical Pharmacology Elsevier Gold Standard 2023.

G. Micromedex® Healthcare Series: Micromedex Drugdex Ann Arbor, Michigan 2023.

H. National Comprehensive Cancer Network. Cancer Guidelines and Drugs and Biologics Compendium 2023.

I. AHFS Drug Information. American Society of Health-Systems Pharmacists or Wolters Kluwer Lexi-Drugs. Bethesda, MD 2023.

J. Ellis LM, et al. American Society of Clinical Oncology perspective: Raising the bar for clinical trials by defining clinically meaningful outcomes. J Clin Oncol. 2014 Apr 20;32(12):1277-80.

K. Medicare Benefit Policy Manual Chapter 15 Covered Medical and Other Health Services: https://www.cms.gov/Regulations-and-Guidance/Guidance/Manuals/Downloads/bp102c15.pdf.

L. NCQA UM 2023 Standards and Elements.