



Kansas City

An Independent Licensee of the Blue Cross and Blue Shield Association

Zepzelca (lurbinectedin)

Policy Number: 5.02.577

Last Review: 12/2023

Origination: 12/2020

Next Review: 12/2024

Lines of Business: ACA &
Commercial

Policy

Blue Cross and Blue Shield of Kansas City (Blue KC) will provide coverage for **Zepzelca (lurbinectedin)** when it is determined to be medically necessary because the criteria shown below are met.

When Policy Topic is covered

Zepzelca (lurbinectedin) may be considered **medically necessary** when the following criteria are met:

FDA Approved Indication:

1. **Metastatic small cell lung cancer (SCLC).** Approve for 1 year if patient is 18 years or older and meets the following:
 - a. Disease progression on or after platinum-based chemotherapy
 - b. Baseline neutrophil count is $\geq 1,500$ cells/mm³
 - c. Baseline platelet count is $\geq 100,000$ /mm³
 - d. Prescriber agrees to monitor for myelosuppression and hepatotoxicity
 - e. Female patients of reproductive potential only: patient will be advised to use effective contraception during treatment with Zepzelca and for 6 months after the final dose
 - f. Males with female partners of reproductive potential only: patient will be advised to use effective contraception during treatment with Zepzelca and for 4 months after the final dose

Reauthorization for 1 year if:

- a. NO disease progression or unacceptable toxicity

When Policy Topic is not covered

Zepzelca (lurbinectedin) is considered **not medically necessary** when the above criteria is not met and **investigational** for all other uses.

Considerations

Zepzelca (lurbinectedin) requires prior authorization through the Clinical Pharmacy Department.

This Blue Cross and Blue Shield of Kansas City policy statement was developed using available resources such as, but not limited to: Food and Drug Administration (FDA) approvals, Facts and Comparisons, National specialty guidelines, local medical policies of other health plans, Medicare (CMS), local providers.

NCDs

<https://www.cms.gov/medicare-coverage-database/search-results.aspx?keyword=&keywordType=starts&areaId=s29&docType=NCD&contractOption=all>

LCDs

<https://www.cms.gov/medicare-coverage-database/search-results.aspx?keyword=&keywordType=starts&areaId=s29&docType=F,P&contractOption=all>

Description of Procedure or Service

Zepzelca (lurbinectedin) is an alkylating drug that binds guanine residues in the minor groove of DNA, forming adducts and resulting in a bending of the DNA helix towards the major groove. Adduct formation triggers a cascade of events that can affect the subsequent activity of DNA binding proteins, including some transcription factors, and DNA repair pathways, resulting in perturbation of the cell cycle and eventual cell death (1).

Regulatory Status

FDA approved indication: Zepzelca is indicated for the treatment of adult patients with metastatic small cell lung cancer (SCLC) with disease progression on or after platinum-based chemotherapy (1).

Zepzelca can cause myelosuppression. Treatment with Zepzelca should only be initiated if absolute neutrophil count (ANC) is at least 1,500 cells/mm³ and platelet count is at least 100,000/mm³. Blood counts should be monitored including neutrophil count and platelet count prior to each administration. For neutrophil count less than 500 cells/mm³ or any value less than lower limit of normal, the use of G-CSF is recommended (1).

Zepzelca can cause hepatotoxicity. Liver function tests should be monitored prior to initiation, periodically during treatment, and as clinically indicated (1).

Zepzelca can cause fetal harm when administered to a pregnant woman. Female patients of reproductive potential should be advised to use effective contraception during treatment with Zepzelca and for 6 months after the final dose. Male patients with female partners of reproductive potential should be advised to use

effective contraception during treatment with Zepzelca and for 4 months after the final dose (1).

The safety and effectiveness of Zepzelca in pediatric patients less than 18 years of age have not been established (1).

Rationale

Prior authorization is required to ensure the safe, clinically appropriate and cost effective use of Zepzelca (lurbinectedin) while maintaining optimal therapeutic outcomes.

Warnings and Precautions

- Extravasation: Vesicant; ensure proper needle or catheter placement prior to and during infusion. Consider infusing through a central line, particularly in patients with limited venous access. Avoid extravasation. Extravasation of lurbinectedin resulting in skin and soft tissue injury, including necrosis, requiring debridement can occur; the time to onset of necrosis after extravasation may vary.
- Older age: Patients ≥ 65 years of age experienced a higher incidence of serious adverse events, as compared to younger patients. Febrile neutropenia, neutropenia, thrombocytopenia, and anemia were the most frequently reported severe adverse reactions reported in patients ≥ 65 years of age.

References

1. Zepzelca [package insert]. Palo Alto, CA: Jazz Pharmaceuticals, Inc.; June 2020.

Billing Coding/Physician Documentation Information

J9223	Injection, lurbinectedin, 0.1 mg
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Policy Implementation/Update Information

12/2020	New policy titled Zepzelca (lurbinectedin)
12/2021	Annual review – no changes made
12/2022	Annual review – added Warnings and Precautions
12/2023	Annual review – no changes made

State and Federal mandates and health plan contract language, including specific provisions/exclusions, take precedence over Medical Policy and must be considered first in determining eligibility for coverage. The medical policies contained herein are for informational

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