

Breast Cancer* Pathways: Neoadjuvant and Adjuvant (Non-Hormonal)

Patient Name: _____

Date of Birth: _____

Member Number: _____

Treatment Start Date: _____

Pathology: _____

Stage: _____

Line of Therapy: _____

ICD-10 Code: _____

Biomarkers/Characteristics: (Select all that apply)

Hormone Receptor (ER or PR): __Negative __Positive

OncotypeDx: __Low __Intermediate __High __Not Done/Reported

HER2 status: __Negative__Positive __Equivocal

Include ovarian suppression (pre-menopause only): __Yes__No

Neoadjuvant Therapy

- HER2 Positive
 - Stages IA[†] through IIIC
 - TCH+P:** docetaxel (Taxotere), carboplatin, trastuzumab, and pertuzumab (Perjeta)
- HER2 Negative, Hormone Receptor (ER or PR) Positive
 - Stage I - IIIC[‡]
 - ddAC → weekly T:** dose dense doxorubicin (Adriamycin) and cyclophosphamide followed by weekly paclitaxel
 - Weekly T → ddAC:** weekly paclitaxel followed by dose dense doxorubicin (Adriamycin) and cyclophosphamide
 - TC:** docetaxel (Taxotere) and cyclophosphamide
 - Triple Negative Breast Cancer (ER and PR, HER2 negative)
 - Stage II - IIIC
 - Pembrolizumab, carboplatin, and paclitaxel
 - Pembrolizumab, doxorubicin, and cyclophosphamide

Adjuvant Therapy

- HER2 Positive
 - Stages IA and IB
 - TH[§]:** paclitaxel and trastuzumab
 - Residual Disease following Neoadjuvant Therapy
 - Ado-trastuzumab emtansine (Kadcyla)
- HER2 Negative, Hormone Receptor (ER or PR) Positive,
 - Stage I - IIIC[‡]
 - ddAC → weekly T:** dose dense doxorubicin (Adriamycin) and cyclophosphamide followed by weekly paclitaxel
 - Weekly T → ddAC:** weekly paclitaxel followed by dose dense doxorubicin (Adriamycin) and cyclophosphamide
 - TC:** docetaxel (Taxotere) and cyclophosphamide

Note: Pathways are independent of specific health plan medical policy coverage criteria. Health plan medical policy/clinical guidelines should be consulted to determine whether proposed services will be covered. Biosimilars of reference products listed are considered "on pathway." However, reimbursement for biosimilar products may be impacted by health plan specific formularies, medical policy and preferred product rules.



8600 West Bryn Mawr Avenue
South Tower – Suite 800 Chicago, IL 60631

Last review: 11/7/2023 | Effective date: 2/5/2024

© 2024 Carelon Medical Benefits Management

Adjuvant Therapy - continued

- Triple Negative Breast Cancer (ER, PR, and HER2 negative)
 - Stage II - IIIC: Continuation following Neoadjuvant Therapy
 - Pembrolizumab, following neoadjuvant pembrolizumab-based treatment
 - Residual Disease following Neoadjuvant Therapy
 - Capecitabine

* Breast cancer histologies include invasive ductal, invasive filtrating lobular, inflammatory and invasive NOS.

† Stage I tumors must be at least >10 mm

‡ Therapy is indicated for T1b or larger tumors for patients under 50 years old with a 21 gene Recurrence Score that is intermediate or high (16+) or any patient with a 21 gene Recurrence Score that is high (26+)

§ Administration of trastuzumab is limited to 1 year

Note: Pathways are independent of specific health plan medical policy coverage criteria. Health plan medical policy/clinical guidelines should be consulted to determine whether proposed services will be covered. Biosimilars of reference products listed are considered “on pathway.” However, reimbursement for biosimilar products may be impacted by health plan specific formularies, medical policy and preferred product rules.



8600 West Bryn Mawr Avenue
South Tower – Suite 800 Chicago, IL 60631

Last review: 11/7/2023 | Effective date: 2/5/2024

© 2024 Carelon Medical Benefits Management