Lung Cancer: Non-Small Cell Lung Cancer (NSCLC) Pathways

Patient Name:	Date of Birth:
Member Number:	Treatment Start Date:
Pathology:	Stage:
Line of Therapy:	ICD-10 Code:
Biomarkers/Characteristics: (Select all that apply) Actionable Oncogenic Targets*:YesNo	PD-L1 expression: Less than 50%Equal to or greater than 50%
Chemoradiation for Localized Disease	
Stages IA-IIIC – Definitive Concurrent Chemoradian	tion
☐ Cisplatin and etoposide	
□ Paclitaxel and carboplatin	
Adjuvant Therapy	
Stages IB-IIIB	
☐ Carboplatin and paclitaxel	
☐ Cisplatin and gemcitabine (Gemzar)	
☐ Cisplatin and pemetrexed (Alimta)	
☐ Cisplatin and vinorelbine (Navelbine)	
First Line of Therapy (1st Line) – Stages IIIB-IV, a	and Recurrent
Squamous and Non-Squamous Cell Carcinoma	
 PD-L1 Expression (TPS) greater or equal to 5 	0%, without known actionable oncogenic targets*
☐ Cemiplimab-rwlc (Libtayo)	
☐ Pembrolizumab (Keytruda)†	
 Ineligible for Immunotherapy 	
☐ Carboplatin or cisplatin and paclitaxel	
☐ Carboplatin or cisplatin and gemcitabine	(Gemzar)
 ALK Rearrangement Positive 	
☐ Alectinib (Alecensa)	
☐ Lorlatinib (Lobrena)	
o EGFR exon 19 deletion or exon 21 L858R mu	tation positive
☐ Osimertinib (Tagrisso)	
☐ Carboplatin or cisplatin, pemetrexed, and	d osimertinib (Tagrisso) (Non-Squamous Only)

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.



Non-Squamous Cell Carcinoma Only
 PD-L1 Expression (TPS) less than 50%, without known actionable oncogenic targets*
☐ Carboplatin or cisplatin, pemetrexed (Alimta), and pembrolizumab (Keytruda)†
☐ Carboplatin or cisplatin, pemetrexed (Alimta), and cemiplimab-rwlc (Libtayo)
 PD-L1 Expression (TPS) greater or equal to 50%, without known actionable oncogenic targets*
☐ Atezolizumab (Tecentriq)
 Ineligible for Immunotherapy
☐ Carboplatin, paclitaxel, and bevacizumab
☐ Carboplatin or cisplatin and pemetrexed (Alimta)
Squamous Cell Carcinoma Only
 PD-L1 Expression (TPS) less than 50% without known actionable oncogenic targets*
☐ Pembrolizumab (Keytruda)†, carboplatin, and paclitaxel
☐ Carboplatin or Cisplatin, paclitaxel, and cemiplimab-rwlc (Libtayo)
Second Line of Therapy (2 nd Line) – Stages IIIB-IV, and Recurrent
Squamous and Non-Squamous Cell Carcinoma
☐ Carboplatin or cisplatin and paclitaxel [‡]
☐ Carboplatin or cisplatin and gemcitabine (Gemzar) [‡]
☐ Carboplatin or cisplatin and pemetrexed (Alimta) [‡]
 No prior immunotherapy has been given
☐ Atezolizumab (Tecentriq)
☐ Nivolumab (Opdivo)
 With or without known actionable oncogenic target* and prior targeted therapy
☐ Carboplatin or cisplatin and paclitaxel
☐ Carboplatin or cisplatin and gemcitabine (Gemzar)
☐ Carboplatin or cisplatin and pemetrexed (Alimta)
Maintenance Therapy – Stages IIIB-IV, and Recurrent
Non-Squamous Cell Carcinoma Only
☐ Continuation bevacizumab
☐ Continuation pemetrexed (Alimta)
☐ Switch pemetrexed (Alimta)
 If previously treated with carboplatin[‡], pemetrexed, and pembrolizumab
☐ Pembrolizumab (Keytruda)† and pemetrexed (Alimta)

First Line of Therapy (1st Line) - Stages IIIB-IV, and Recurrent - Continued

- * Actionable oncogenic targets refer to the driver aberrations in EGFR, ALK, and ROS1
- † Administered at a dose of 200 mg every 3 weeks OR 400 mg every 6 weeks per the FDA label OR 2 mg/kg (up to a maximum of 200 mg) every 3 weeks, as clinically appropriate
- ‡ Eligible only if immunotherapy alone was administered as first line treatment. Ineligible if chemotherapy was used in the first line setting.

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