Reference number(s)
2041-A

Medical Prior Authorization oxaliplatin

Products Referenced by this Document

Drugs that are listed in the following table include both brand and generic and all dosage forms and strengths unless otherwise stated. Over-the-counter (OTC) products are not included unless otherwise stated.

Brand Name	Generic Name
oxaliplatin (all brands)	oxaliplatin

Indications

FDA-approved Indications

Oxaliplatin, in combination with infusional fluorouracil and leucovorin, is indicated for:

- Adjuvant treatment of stage III colon cancer in patients who have undergone complete resection of the primary tumor.
- Treatment of advanced colorectal cancer.

Compendial Uses

- Colon cancer
- Rectal cancer
- Esophageal or esophagogastric junction cancers
- Gastric cancer
- Hepatobiliary cancers
    - Extrahepatic cholangiocarcinoma
    - Intrahepatic cholangiocarcinoma
    - Gallbladder cancer
- Bladder cancer (including non-urothelial and urothelial cancer with variant histology)
- Neuroendocrine and adrenal tumors

    - Neuroendocrine tumors of the gastrointestinal tract, lung, and thymus
    - Neuroendocrine tumors of the pancreas
    - Well differentiated grade 3 neuroendocrine tumors
    - Poorly differentiated/large or small cell disease/mixed neuroendocrine-non-neuroendocrine neoplasms
- Occult primary tumors (cancer of unknown primary)
- Ovarian cancer, fallopian tube cancer, and primary peritoneal cancer
    - Epithelial ovarian cancer, fallopian tube cancer, and primary peritoneal cancer
    - Carcinosarcoma (malignant mixed Müllerian tumors)
    - Clear cell carcinoma of the ovary
    - Mucinous carcinoma of the ovary
    - Grade 1 endometrioid carcinoma
    - Low-grade serous carcinoma/ovarian borderline epithelial tumors (low malignant potential)
    - Malignant germ cell tumors
- Pancreatic adenocarcinoma
- Testicular cancer
- Chronic lymphocytic leukemia/small lymphocytic lymphoma (CLL/SLL)
- Anal carcinoma
- B-Cell lymphomas
    - Histologic Transformation of Indolent Lymphomas to Diffuse Large B-Cell Lymphoma
    - Mantle Cell Lymphoma
    - Diffuse Large B-Cell Lymphoma
    - High-Grade B-Cell Lymphomas
    - Human immunodeficiency virus (HIV)-Related B-Cell Lymphomas
    - Post-Transplant Lymphoproliferative Disorders
- Primary cutaneous lymphomas
    - Mycosis fungoides/Sezary syndrome
    - Primary cutaneous CD30+ T-Cell lymphoproliferative disorders
- T-Cell lymphomas
    - Peripheral T-Cell lymphomas
    - Adult T-Cell leukemia/lymphoma
    - Extranodal natural killer (NK)/T-Cell lymphoma
    - Hepatosplenic T-Cell lymphoma
    - Breast Implant-Associated Anaplastic Large Cell Lymphoma (ALCL)
- Classic Hodgkin lymphoma
- Small bowel adenocarcinoma
- Ampullary adenocarcinoma
- Nasopharyngeal carcinoma

All other indications are considered experimental/investigational and not medically necessary.

Coverage Criteria

Colorectal Cancer

Authorization of 6 months may be granted for treatment of colorectal cancer (including appendiceal adenocarcinoma, anal adenocarcinoma, and colon and rectal cancers).

Pancreatic Adenocarcinoma

Authorization of 6 months may be granted for treatment of pancreatic adenocarcinoma.

Esophageal and Esophagogastric Junction Cancers

Authorization of 6 months may be granted for treatment of esophageal and esophagogastric junction cancers.

Gastric Cancer

Authorization of 6 months may be granted for treatment of gastric cancer.

Biliary Tract Cancers

Authorization of 6 months may be granted for treatment of biliary tract cancers (including intrahepatic and extrahepatic cholangiocarcinoma and gallbladder cancer).

Neuroendocrine and Adrenal Tumors

Authorization of 6 months may be granted for treatment of neuroendocrine and adrenal tumors (including neuroendocrine tumors of the gastrointestinal tract, lung, and thymus, neuroendocrine tumors of the pancreas, well differentiated grade 3 neuroendocrine tumors and poorly differentiated/large or small cell carcinoma/mixed neuroendocrine-non-neuroendocrine neoplasms).

Occult Primary Tumors (cancer of unknown primary)

Authorization for 6 months may be granted for treatment of occult primary tumors.

Ovarian Cancer, Fallopian Tube Cancer, and Primary Peritoneal Cancer

Authorization of 6 months may be granted for treatment of epithelial ovarian cancer, fallopian tube cancer, primary peritoneal cancer, carcinosarcoma (malignant mixed Müllerian tumors), clear cell carcinoma of the ovary, mucinous carcinoma of the ovary, grade 1 endometrioid carcinoma, low-grade serous

carcinoma/ovarian borderline epithelial tumors (low malignant potential), and malignant germ cell tumor residual disease.

Testicular Cancer

Authorization of 6 months may be granted for treatment of testicular cancer.

Bladder Cancer

Authorization of 6 months may be granted for treatment of bladder cancer (including non-urothelial and urothelial cancer with variant histology).

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

Authorization of 6 months may be granted for treatment of CLL/SLL.

Anal Carcinoma

Authorization of 6 months may be granted for treatment of metastatic anal cancer.

B-Cell Lymphomas

Authorization of 6 months may be granted for treatment of B-Cell lymphomas (including histologic transformation of indolent lymphomas to diffuse large B-Cell lymphoma, mantle cell lymphoma, diffuse large B-Cell lymphoma, high-grade B-Cell lymphomas, HIV-Related B-Cell lymphomas, and post-transplant lymphoproliferative disorders).

Primary Cutaneous Lymphomas

Authorization of 6 months may be granted for treatment of primary cutaneous lymphomas (including mycosis fungoides/Sezary syndrome and primary cutaneous CD30+ T-Cell lymphoproliferative disorders).

T-Cell Lymphomas

Authorization of 6 months may be granted for treatment of T-Cell lymphomas (including peripheral T-Cell lymphomas, adult T-Cell leukemia/lymphoma, hepatosplenic T-Cell lymphoma, extranodal NK/T-Cell lymphoma, and breast implant-associated ALCL).

Classic Hodgkin Lymphoma

Authorization of 6 months may be granted for treatment of classic Hodgkin lymphoma.

Small Bowel Adenocarcinoma

Authorization of 6 months may be granted for treatment of small bowel adenocarcinoma.

Ampullary Adenocarcinoma

Authorization of 6 months may be granted for treatment of ampullary adenocarcinoma.

Nasopharyngeal Carcinoma

Authorization of 6 months may be granted for treatment of nasopharyngeal carcinoma as concurrent chemoradiation for members with a contraindication to cisplatin.

Continuation of Therapy

Authorization of 6 months may be granted for continued treatment in members requesting reauthorization for an indication in the coverage criteria section when there is no evidence of unacceptable toxicity or disease progression while on the current regimen.

References

1. Oxaliplatin [package insert]. Lake Forest, IL: Hospira, Inc.; September 2023.
2. The NCCN Drugs & Biologics Compendium® © 2024 National Comprehensive Cancer Network, Inc. Available at: https://www.nccn.org. July 1, 2024.
3. Lexicomp [database online]. Hudson, OH: Lexi-Comp, Inc. Available at: https://online.lexi.com/lco/action/home [available with subscription]. Accessed July 1, 2024.
4. Yu-Pei Chen et al., Chemotherapy in Combination with Radiotherapy for Definitive-Intent Treatment of Stage II-IVA Nasopharyngeal Carcinoma: CSCO and ASCO Guideline. Journal of Clinical Oncology 39, 840-859(2021).