
5.21.151

Section:	Prescription Drugs	Effective Date:	January 1, 2024
Subsection:	Antineoplastic Agents	Original Policy Date:	July 10, 2020
Subject:	Zevalin	Page:	1 of 5

Last Review Date: December 8, 2023

Zevalin

Description

Zevalin (ibritumomab tiuxetan)

Background

Zevalin (ibritumomab tiuxetan) binds specifically to the CD20 antigen. The CD20 antigen is expressed on pre-B and mature B lymphocytes and on >90% of B-cell non-Hodgkin's lymphomas (NHL). The CD20 antigen is not shed from the cell surface and does not internalize upon antibody binding. The chelate tiuxetan, which tightly binds Y-90, is covalently linked to ibritumomab. The beta emission from Y-90 induces cellular damage by the formation of free radicals in the target and neighboring cells (1).

Rituximab is an essential component of the Zevalin therapeutic regimen (1).

Regulatory Status

FDA-approved indication: Zevalin is indicated for the treatment of: (1)

1. Adult patients with relapsed or refractory, low-grade or follicular B-cell non-Hodgkin's lymphoma (NHL).
2. Previously untreated follicular NHL in adult patients who achieve a partial or complete response to first-line chemotherapy.

Zevalin has boxed warnings regarding severe infusion reactions, prolonged and severe cytopenias, and severe cutaneous and mucocutaneous reactions. Serious infusion reactions may occur within 24 hours of rituximab infusion. Prolonged and severe cytopenias occur in most patients. Severe cutaneous and mucocutaneous reactions have been reported with Zevalin therapeutic regimen. 32 mCi (1184 MBq) of Y-90 Zevalin should not be exceeded (1).

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Zevalin/rituximab should only be administered in facilities where immediate access to resuscitative measures are available (1).

The safety of immunization with live viral vaccines following the Zevalin therapeutic regimen has not been studied. Live viral vaccines should not be administered to patients who have recently received Zevalin (1).

Zevalin may cause fetal harm when administered to a pregnant woman. Females of reproductive potential and males with female partners of reproductive potential should be advised to use effective contraception during treatment and for a minimum of 12 months after the last dose (1).

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

Related policies

Policy

This policy statement applies to clinical review performed for pre-service (Prior Approval, Precertification, Advanced Benefit Determination, etc.) and/or post-service claims.

Zevalin may be considered **medically necessary** if the conditions indicated below are met.

Zevalin may be considered **investigational** for all other indications.

Prior-Approval Requirements

Age 18 years of age or older

Diagnoses

Patient must have **ONE** of the following:

1. Relapsed or refractory, low-grade or follicular B-cell non-Hodgkin's lymphoma (NHL)
2. Follicular non-Hodgkin's lymphoma (NHL)

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- a. Patient has achieved a partial or complete response to first-line chemotherapy

AND ALL of the following:

- a. Rituximab will be given as part of the Zevalin therapeutic regimen
- b. Prescriber agrees to monitor for serious infusion reactions, cytopenias, and severe cutaneous and mucocutaneous reactions
- c. Prescriber will not exceed the FDA maximum labeled dose of 32.0 mCi (1184 MBq)
- d. **NOT** given concurrently with live vaccines
- e. Females of reproductive potential **only**: patient will be advised to use effective contraception during treatment with Zevalin and for 12 months after the last dose
- f. Male patients with female partners of reproductive potential **only**: patient will be advised to use effective contraception during treatment with Zevalin and for 12 months after the last dose

Prior – Approval *Renewal* Requirements

Age 18 years of age or older

Diagnoses

Patient must have **ONE** of the following:

1. Relapsed or refractory, low-grade or follicular B-cell non-Hodgkin's lymphoma (NHL)
2. Follicular non-Hodgkin's lymphoma (NHL)

AND ALL of the following:

- a. Rituximab will be given as part of the Zevalin therapeutic regimen
- b. Prescriber agrees to monitor for serious infusion reactions, cytopenias, and severe cutaneous and mucocutaneous reactions
- c. Prescriber will not exceed the FDA maximum labeled dose of 32.0 mCi (1184 MBq)
- d. **NOT** given concurrently with live vaccines

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- e. Females of reproductive potential **only**: patient will be advised to use effective contraception during treatment with Zevalin and for 12 months after the last dose
- f. Male patients with female partners of reproductive potential **only**: patient will be advised to use effective contraception during treatment with Zevalin and for 12 months after the last dose

Policy Guidelines

Pre - PA Allowance

None

Prior - Approval Limits

Duration 12 months

Prior – Approval *Renewal* Limits

Same as above

Rationale

Summary

Zevalin (ibritumomab tiuxetan) binds specifically to the CD20 antigen. The CD20 antigen is expressed on pre-B and mature B lymphocytes and on >90% of B-cell non-Hodgkin's lymphomas (NHL). The CD20 antigen is not shed from the cell surface and does not internalize upon antibody binding. The chelate tiuxetan, which tightly binds Y-90, is covalently linked to ibritumomab. The beta emission from Y-90 induces cellular damage by the formation of free radicals in the target and neighboring cells. The safety and effectiveness of Zevalin in pediatric patients less than 18 years of age have not been established (1).

Prior authorization is required to ensure the safe, clinically appropriate, and cost-effective use of Zevalin while maintaining optimal therapeutic outcomes.

References

1. Zevalin [package insert]. East Windsor, NJ: Acrotech Biopharma LLC; April 2023.
2. NCCN Drugs & Biologics Compendium® Ibritumomab tiuxetan 2023. National Comprehensive Cancer Network, Inc. Accessed on October 19, 2023.

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Policy History

Date	Action
July 2020	Addition to PA
September 2020	Annual review
December 2021	Annual review and reference update
December 2022	Annual review and reference update
December 2023	Annual review and reference update

Keywords

This policy was approved by the FEP® Pharmacy and Medical Policy Committee on December 8, 2023 and is effective on January 1, 2024.