

## Commercial/Healthcare Exchange PA Criteria

*Effective: April 10, 2020*

**Prior Authorization:** Tazverik

**Products Affected:** Tazverik (tazemetostat) oral tablets

**Medication Description:** Tazverik (Tazemetostat) is an inhibitor of enhancer of zeste homolog-2 (EZH2) histone methyltransferase; it also inhibits EZH1 to a lesser extent. EZH2 is the catalytic subunit of EZH2 polycomb repressive complex 2 (PRC2); it catalyzes the trimethylation of lysine 27 of histone H3 leading to transcriptional repression of genes associated with cell cycle arrest. SWItch/Sucrose Non-Fermentable (SWI/SNF) complexes can antagonize PRC2 function in the regulation of some gene expression.

**Covered Uses:**

1. Treatment of adults and pediatric patients aged 16 years and older with metastatic or locally advanced epithelioid sarcoma not eligible for complete resection.
2. Adult patients with relapsed or refractory follicular lymphoma whose tumors are positive for an EZH2 mutation as detected by an FDA-approved test and who have received at least 2 prior systemic therapies.
3. Adult patients with relapsed or refractory follicular lymphoma who have no satisfactory alternative treatment options

**Exclusion Criteria:** N/A

**Required Medical Information:**

1. Diagnosis
2. Previous medications tried/failed

**Age Restrictions:** Epithelioid sarcoma, 16 years of age or older  
Follicular lymphoma, 18 years of age or older

**Prescriber Restrictions:** Prescribed by, or in consultation with, an oncologist.

**Coverage Duration:** 3 years

**Other Criteria:**

**Epithelioid Sarcoma**

- A. Patient has metastatic or locally advanced epithelioid sarcoma; **AND**
- B. Patient is not eligible for complete resection.

**Relapsed/Refractory Follicular Lymphoma with EZH2 positive mutation**

- A. Patient has relapsed or refractory follicular lymphoma; **AND**
- B. Patient's tumors are positive for an EZH2 mutation as detected by an FDA-approved test; **AND**
- C. Patient has received at least 2 prior systemic therapies.

**Relapsed/Refractory Follicular Lymphoma**

- A. Patient has relapsed or refractory disease with no satisfactory alternative treatment options.

**References:**

1. Tazverik [package insert]. Cambridge, MA; Epizyme, Inc.; January 2020.
2. The NCCN Soft Tissue Sarcoma Clinical Practice Guidelines in Oncology (Version 6.2019 – February 10, 2020). © 2020 National Comprehensive Cancer Network, Inc. Available at: <http://www.nccn.org>. Accessed on March 30, 2020.

**Policy Revision history**

<b>Rev #</b>	<b>Type of Change</b>	<b>Summary of Change</b>	<b>Sections Affected</b>	<b>Date</b>
1	New Policy	New Policy	All	4/7/2020
2	Update	<p>Updated medication description- Removed indications</p> <p>Added new FDA approved indications to covered uses, criteria, and age restrictions:</p> <p>1. Adult patients with relapsed or refractory follicular lymphoma whose tumors are positive for an EZH2 mutation as detected by an FDA-approved test and who have received at least 2 prior systemic therapies. 2. Adult patients with relapsed or refractory follicular lymphoma who have no satisfactory alternative treatment options</p> <p>Added previous medications tried/failed to Required medical information</p>	<p>Medication Description</p> <p>Covered uses</p> <p>Required Medical information</p> <p>Age restrictions</p> <p>Other criteria</p>	6/23/2020