SmartPA Criteria Proposal

Drug/Drug Class:	Cyclin-Dependent Kinase (CDK) 4/6 Inhibitors PDL Edit
First Implementation Date:	April 1, 2021
Revised Date:	N/A
Prepared For:	MO HealthNet
Prepared By:	MO HealthNet/Conduent
Criteria Status:	☐Existing Criteria ☐Revision of Existing Criteria ☒New Criteria

Executive Summary

Purpose: The MO HealthNet Pharmacy Program will implement a state-specific preferred drug list.

Why Issue Selected: The Centers for Disease Control and Prevention (CDC) ranks breast cancer as the most common form of cancer among women in the United States, second only to skin cancer. Breast cancer falls behind only lung cancer in death rates compared to all other forms of cancer. About 12% of women can be expected to develop invasive breast cancer over the course of their lifetime in relation to 1.14% of males. Hormone-receptor positive (HR+) breast cancer accounts for 70-80% of new cases and has historically been treated with endocrine therapy including selective estrogen receptor inhibitors or aromatase inhibitors. Due to the high rate of resistance seen with these agents, targeted treatments such as cyclin-dependent kinase (CDK) inhibitors have been developed.

CDKs are protein kinases that serve a multitude of functions including cell proliferation and transcription modulation. CDKs 4 and 6, specifically, play a role in mediating transition from G0/G1 phase to S phase of the cell cycle. Dysregulation or hyperactivation of CDKs 4 and 6 has been identified as a potential source of uncontrolled cell division. The more selective CDK 4/6 inhibitors have replaced the first-generation Pan-CDK inhibitors which were associated with problematic toxicity profiles. Ibrance® (palbociclib), Kisqali® (ribociclib) and Verzenio™ (abemaciclib) are all indicated for the treatment of adult patients with HR+, human epidermal growth factor receptor 2 negative (HER2-) advanced or metastatic breast cancer. The only agent currently approved with an additional indication for use as monotherapy is Verzenio; all others require combination therapy with either an aromatase inhibitor or fulvestrant depending on the stage of disease progression.

Total program savings for the PDL classes will be regularly reviewed.

Program-Specific Information:

Preferred Agents	Non-Preferred Agents
• Kisqali® • Kisqali® Femara® Co-Pack • Verzenio™	• Ibrance®

Type of Criteria:	☐ **Increased risk of ADE**	☒ **Preferred Drug List**
	☒ **Appropriate Indications**	☐ **Clinical Edit**
Data Sources:	☐ **Only Administrative Databases**	☒ **Databases + Prescriber-Supplied**

Setting & Population

- Drug class for review: Cyclin-Dependent Kinase (CDK) 4/6 Inhibitors
- Age range: All appropriate MO HealthNet participants

Approval Criteria

- Documented compliance on current therapy regimen **OR**
- Failure to achieve desired therapeutic outcomes with trial of 2 preferred agents
    - Documented trial period of preferred agents
    - Documented ADE/ADR to preferred agents

Denial Criteria

- Lack of adequate trial on required preferred agents
- Therapy will be denied if all approval criteria are not met

Required Documentation

Laboratory Results:	☐	Progress Notes:	☐
MedWatch Form:	☐	Other:	☐

Disposition of Edit

Denial: Exception Code “0160” (Preferred Drug List)
Rule Type: PDL

Default Approval Period

1 year

References

1. Verzenio [package insert]. Indianapolis, IN: Lilly USA, LLC; 2020.
2. Ibrance [package insert]. New York, NY: Pfizer; 2020.
3. Kisqali [package insert]. East Hanover, NJ: Novartis Pharmaceuticals Corporation; 2020.
4. National Comprehensive Cancer Network (NCCN). NCCN Clinical Practice Guidelines in Oncology (NCCN Guidelines®). Breast Cancer. Version 6.2020 – September 8, 2020. https://www.nccn.org/
5. Niu, Ying, Xu, Junnan, Sun, Tao. “Cyclin-Dependent Kinases 4/6 Inhibitors in Breast Cancer: Current Status, Resistance, and Combination Strategies.” Journal of Cancer. 2019; 10(22):5504-5517.
6. Evidence-Based Medicine and Fiscal Analysis: “Cyclin-Dependent Kinase (CDK)4/6 Inhibitors – Therapeutic Class Review”, Conduent Business Services, L.L.C., Richmond, VA; November 2020.
7. Evidence-Based Medicine Analysis: “Cyclin-Dependent Kinase (CDK)4/6 Inhibitors”, UMKC-DIC; November 2020.