



Tazverik™ (tazemetostat) (Oral)

Document Number: IC-0526

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I. Length of Authorization

Coverage will be provided for six months and may be renewed.

II. Dosing Limits

- A. Quantity Limit (max daily dose) [NDC Unit]:
 - o 200 mg tablets: 8 tablets per day
- B. Max Units (per dose and over time) [HCPCS Unit]:
 - 1600 mg daily

III. Initial Approval Criteria 1-6

Coverage is provided in the following conditions:

Patient is at least 18 years of age unless otherwise specified; AND

Universal Criteria 1,3

- Patient will avoid concomitant therapy with all of the following:
 - Coadministration with moderate or strong CYP3A4 inducers (e.g., rifampin, carbamazepine, St. John's Wort, etc.), AND
 - Coadministration with moderate or strong CYP3A4 inhibitors (e.g., ketoconazole, clarithromycin, grapefruit juice, etc.), or if therapy is unavoidable, the patient will be monitored closely for adverse reaction and/or dose modifications will be implemented;
 AND
- Patient does not have a history of T-cell lymphoblastic lymphoma or T-cell acute lymphoblastic leukemia; AND
- Must be used as a single agent; AND

Epithelioid Sarcoma † 1-6

- Patient is 16 years or older; AND
- Patient has locally advanced or metastatic disease; AND
- Patient is not eligible for complete resection; AND



Patient's tumor does NOT express INI1 (i.e., INI1 loss)

Follicular Lymphoma † ‡ Φ 1,9

- Patient has relapsed or refractory disease; AND
 - Patient has an Enhancer of Zeste Homolog 2 (EZH2) mutation as determined by an FDA-approved or CLIA compliant test♦; AND
 - Patient has received at least 2 prior systemic therapies; OR
 - o Patient has no satisfactory alternative treatment options
- ♦ If confirmed using an immunotherapy assay-http://www.fda.gov/companiondiagnostics
- † FDA approved indication(s); ‡ Compendia recommended indication(s); ♠ Orphan Drug

IV. Renewal Criteria ¹

Authorizations can be renewed based on the following criteria:

- Patient continues to meet universal and other indication-specific relevant criteria such as concomitant therapy requirements (not including prerequisite therapy), performance status, etc. identified in section III; AND
- Disease response with treatment as defined by stabilization of disease or decrease in size of tumor or tumor spread; **AND**
- Absence of unacceptable toxicity from the drug. Examples of unacceptable toxicity include the following: secondary malignancies (i.e., T-cell lymphoblastic lymphoma, myelodysplastic syndrome, acute myeloid leukemia), neutropenia, thrombocytopenia, anemia, etc.

V. Dosage/Administration ¹

Indication	Dose
	The recommended dosage is 800 mg (4 x 200 mg tablets) orally twice daily with or without food until disease progression or unacceptable toxicity.

VI. Billing Code/Availability Information

HCPCS code:

- J8999 Prescription drug, oral, chemotherapeutic, Not Otherwise Specified
- C9399 Unclassified drugs or biologicals (Hospital Outpatient Use ONLY)

NDC:

• Tazverik 200 mg film-coated tablets: 72607-0100-xx

VII. References

- 1. Tazverik [package insert]. Cambridge, MA; Epizyme, Inc; July 2020. Accessed June 2021.
- 2. Referenced with permission from the NCCN Drugs & Biologics Compendium (NCCN Compendium*) tazemetostat. National Comprehensive Cancer Network, 2021. The NCCN



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- 3. Gounder MM, Stacchiotti S, Schöffski P, et al. Phase 2 multicenter study of the EZH2 inhibitor tazemetostat in adults with INI1 negative epithelioid sarcoma (NCT02601950). Journal of Clinical Oncology 2017 35:15_suppl, 11058-11058.
- 4. Hollman TJ, Hornick JL. INI1-deficient tumors: Diagnostic features and molecular genetics. Am J Surg Pathol. 2011;35(10):e47-63.
- 5. Armah HB, Parwani AV. Epithelioid sarcoma. Arch Pathol Lab Med. 2009;133(5):814-819.
- 6. Hornick JL, Dal Cin P, Fletcher CDM. Loss of INI1 expression is characteristic of both conventional and proximal-type epithelioid sarcoma. Am J Surg Pathol. 2009;33(4):542-550.
- 7. Stacchiotti S, Schoffski P, Jones R, et al. Safety and efficacy of tazemetostat, a first-in-class EZH2 inhibitor, in patients with epithelioid sarcoma (NCT0261950). J Clin Oncol 2019;37:11003.
- 8. Morschhauser F, Tilly H, Chaidos A, et al. Phase 2 Multicenter Study of Tazemetostat, an EZH2 Inhibitor, in Patients with Relapsed or Refractory Follicular Lymphoma. Blood 2019; 134 (Supplement_1): 123. doi: https://doi.org/10.1182/blood-2019-128096.
- 9. Referenced with permission from the NCCN Clinical Practice Guidelines in Oncology (NCCN Guidelines®) for B-Cell Lymphomas. Version 4.2021. National Comprehensive Cancer Network, 20201 NATIONAL COMPREHENSIVE CANCER NETWORK®, NCCN®, and NCCN GUIDELINES® are trademarks owned by the National Comprehensive Cancer Network, Inc." To view the most recent and complete version of the Guidelines, go online to NCCN.org. Accessed June 2021.

Appendix 1 – Covered Diagnosis Codes

ICD-10	ICD-10 Description	
C48.0	Malignant neoplasm of retroperitoneum	
C48.1	Malignant neoplasm of specified parts of peritoneum	
C48.2	Malignant neoplasm of peritoneum, unspecified	
C48.8	Malignant neoplasm of overlapping sites of retroperitoneum and peritoneum	
C49.0	Malignant neoplasm of connective and soft tissue of head, face and neck	
C49.10	Malignant neoplasm of connective and soft tissue of unspecified upper limb, including shoulder	
C49.11	Malignant neoplasm of connective and soft tissue of right upper limb, including shoulder	
C49.12	Malignant neoplasm of connective and soft tissue of left upper limb, including shoulder	
C49.20	Malignant neoplasm of connective and soft tissue of unspecified lower limb, including hip	
C49.21	Malignant neoplasm of connective and soft tissue of right lower limb, including hip	



ICD-10	ICD-10 Description		
C49.22	Malignant neoplasm of connective and soft tissue of left lower limb, including hip		
C49.3	Malignant neoplasm of connective and soft tissue of thorax		
C49.4	Malignant neoplasm of connective and soft tissue of abdomen		
C94.5	Malignant neoplasm of connective and soft tissue of pelvis		
C49.6	Malignant neoplasm of connective and soft tissue of trunk, unspecified		
C49.8	Malignant neoplasm of overlapping sites of connective and soft tissue		
C49.9	Malignant neoplasm of connective and soft tissue, unspecified		
C82.00	Follicular lymphoma grade I, unspecified site		
C82.01	Follicular lymphoma grade I, lymph nodes of head, face and neck		
C82.02	Follicular lymphoma, grade I, intrathoracic lymph nodes		
C82.03	Follicular lymphoma grade I, intra-abdominal lymph nodes		
C82.04	Follicular lymphoma grade I, lymph nodes of axilla and upper limb		
C82.05	Follicular lymphoma grade I, lymph nodes of inguinal regional and lower limb		
C82.06	Follicular lymphoma grade I, intrapelvic lymph nodes		
C82.07	Follicular lymphoma grade I, spleen		
C82.08	Follicular lymphoma grade I, lymph nodes of multiple sites		
C82.09	Follicular lymphoma grade I, extranodal and solid organ sites		
C82.10	Follicular lymphoma grade II, unspecified site		
C82.11	Follicular lymphoma grade II, lymph nodes of head, face and neck		
C82.12	Follicular lymphoma, grade II, intrathoracic lymph nodes		
C82.13	Follicular lymphoma grade II, intra-abdominal lymph nodes		
C82.14	Follicular lymphoma grade II, lymph nodes of axilla and upper limb		
C82.15	Follicular lymphoma grade II, lymph nodes of inguinal region and lower limb		
C82.16	Follicular lymphoma grade II, intrapelvic lymph nodes		
C82.17	Follicular lymphoma grade II, spleen		
C82.18	Follicular lymphoma grade II, lymph nodes of multiple sites		
C82.19	Follicular lymphoma grade II, extranodal and solid organ sites		
C82.20	Follicular lymphoma grade III, unspecified, unspecified site		
C82.21	Follicular lymphoma grade III, unspecified, lymph nodes of head, face and neck		
C82.22	Follicular lymphoma, grade III, unspecified, intrathoracic lymph nodes		
C82.23	Follicular lymphoma grade III, unspecified, intra-abdominal lymph nodes		
C82.24	Follicular lymphoma grade III, unspecified, lymph nodes of axilla and upper limb		
C82.25	Follicular lymphoma grade III, unspecified, lymph nodes of inguinal region and lower limb		
C82.26	Follicular lymphoma grade III, unspecified, intrapelvic lymph nodes		
C82.27	Follicular lymphoma grade III, unspecified, spleen		



ICD-10	ICD-10 Description	
C82.28	Follicular lymphoma grade III, unspecified, lymph nodes of multiple sites	
C82.29	Follicular lymphoma grade III, unspecified, extranodal and solid organ sites	
C82.30	Follicular lymphoma grade IIIa, unspecified site	
C82.31	Follicular lymphoma grade IIIa, lymph nodes of head, face and neck	
C82.32	Follicular lymphoma, grade IIIa, intrathoracic lymph nodes	
C82.33	Follicular lymphoma grade IIIa, intra-abdominal lymph nodes	
C82.34	Follicular lymphoma grade IIIa, lymph nodes of axilla and upper limb	
C82.35	Follicular lymphoma grade IIIa, lymph nodes of inguinal region and lower limb	
C82.36	Follicular lymphoma grade IIIa, intrapelvic lymph nodes	
C82.37	Follicular lymphoma grade IIIa, spleen	
C82.38	Follicular lymphoma grade IIIa, lymph nodes of multiple sites	
C82.39	Follicular lymphoma grade IIIa, extranodal and solid organ sites	
C82.40	Follicular lymphoma grade IIIb, unspecified site	
C82.41	Follicular lymphoma grade IIIb, lymph nodes of head, face and neck	
C82.42	Follicular lymphoma, grade IIIb, intrathoracic lymph nodes	
C82.43	Follicular lymphoma grade IIIb, intra-abdominal lymph nodes	
C82.44	Follicular lymphoma grade IIIb, lymph nodes of axilla and upper limb	
C82.45	Follicular lymphoma grade IIIb, lymph nodes of inguinal region and lower limb	
C82.46	Follicular lymphoma grade IIIb, intrapelvic lymph nodes	
C82.47	Follicular lymphoma grade IIIb, spleen	
C82.48	Follicular lymphoma grade IIIb, lymph nodes of multiple sites	
C82.49	Follicular lymphoma grade IIIb, extranodal and solid organ sites	
C82.50	Diffuse follicle center lymphoma, unspecified site	
C82.51	Diffuse follicle center lymphoma, lymph nodes of head, face, and neck	
C82.52	Diffuse follicle center lymphoma, intrathoracic lymph nodes	
C82.53	Diffuse follicle center lymphoma, intra-abdominal lymph nodes	
C82.54	Diffuse follicle center lymphoma, lymph nodes of axilla and upper limb	
C82.55	Diffuse follicle center lymphoma, lymph nodes of inguinal region and lower limb	
C82.56	Diffuse follicle center lymphoma, intrapelvic lymph nodes	
C82.57	Diffuse follicle center lymphoma, spleen	
C82.58	Diffuse follicle center lymphoma, lymph nodes of multiple sites	
C82.59	Diffuse follicle center lymphoma, extranodal and solid organ sites	
C82.60	Cutaneous follicle center lymphoma, unspecified site	
C82.61	Cutaneous follicle center lymphoma, lymph nodes of head, face, and neck	
C82.62	Cutaneous follicle center lymphoma, intrathoracic lymph nodes	



ICD-10	ICD-10 Description	
C82.63	Cutaneous follicle center lymphoma, intra-abdominal lymph nodes	
C82.64	Cutaneous follicle center lymphoma, lymph nodes of axilla and upper limb	
C82.65	Cutaneous follicle center lymphoma, lymph nodes of inguinal region and lower limb	
C82.66	Cutaneous follicle center lymphoma, intrapelvic lymph nodes	
C82.67	Cutaneous follicle center lymphoma, spleen	
C82.68	Cutaneous follicle center lymphoma, lymph nodes of multiple sites	
C82.69	Cutaneous follicle center lymphoma, extranodal and solid organ sites	
C82.80	Other types of follicular lymphoma, unspecified site	
C82.81	Other types of follicular lymphoma, lymph nodes of head, face, and neck	
C82.82	Other types of follicular lymphoma, intrathoracic lymph nodes	
C82.83	Other types of follicular lymphoma, intra-abdominal lymph nodes	
C82.84	Other types of follicular lymphoma, lymph nodes of axilla and upper limb	
C82.85	Other types of follicular lymphoma, lymph nodes of inguinal region and lower limb	
C82.86	Other types of follicular lymphoma, intrapelvic lymph nodes	
C82.87	Other types of follicular lymphoma, spleen	
C82.88	Other types of follicular lymphoma, lymph nodes of multiple sites	
C82.89	Other types of follicular lymphoma, extranodal and solid organ sites	
C82.90	Follicular lymphoma, unspecified, unspecified site	
C82.91	Follicular lymphoma, unspecified, lymph nodes of head, face and neck	
C82.92	Follicular lymphoma, unspecified, intrathoracic lymph nodes	
C82.93	Follicular lymphoma, unspecified, intra-abdominal lymph nodes	
C82.94	Follicular lymphoma, unspecified, lymph nodes of axilla and upper limb	
C82.95	Follicular lymphoma, unspecified lymph nodes of inguinal region and lower limb	
C82.96	Follicular lymphoma, unspecified, intrapelvic lymph nodes	
C82.97	Follicular lymphoma, unspecified, spleen	
C82.98	Follicular lymphoma, unspecified, lymph nodes of multiple sites	
C82.99	Follicular lymphoma, unspecified, extranodal and solid organ sites	

Appendix 2 – Centers for Medicare and Medicaid Services (CMS)

Medicare coverage for outpatient (Part B) drugs is outlined in the Medicare Benefit Policy Manual (Pub. 100-2), Chapter 15, §50 Drugs and Biologicals. In addition, National Coverage Determination (NCD), Local Coverage Articles (LCAs) and Local Coverage Determinations (LCDs) may exist and compliance with these policies is required where applicable. They can be found at: http://www.cms.gov/medicare-coverage-database/search/advanced-search.aspx. Additional indications may be covered at the discretion of the health plan.

Medicare Part B Covered Diagnosis Codes (applicable to existing NCD/LCA/LCD): N/A



Medicare Part B Administrative Contractor (MAC) Jurisdictions				
Jurisdiction	Applicable State/US Territory	Contractor		
E (1)	CA, HI, NV, AS, GU, CNMI	Noridian Healthcare Solutions, LLC		
F (2 & 3)	AK, WA, OR, ID, ND, SD, MT, WY, UT, AZ	Noridian Healthcare Solutions, LLC		
5	KS, NE, IA, MO	Wisconsin Physicians Service Insurance Corp (WPS)		
6	MN, WI, IL	National Government Services, Inc. (NGS)		
H (4 & 7)	LA, AR, MS, TX, OK, CO, NM	Novitas Solutions, Inc.		
8	MI, IN	Wisconsin Physicians Service Insurance Corp (WPS)		
N (9)	FL, PR, VI	First Coast Service Options, Inc.		
J (10)	TN, GA, AL	Palmetto GBA, LLC		
M (11)	NC, SC, WV, VA (excluding below)	Palmetto GBA, LLC		
L (12)	DE, MD, PA, NJ, DC (includes Arlington &	Novitas Solutions, Inc.		
	Fairfax counties and the city of Alexandria in VA)			
K (13 & 14)	NY, CT, MA, RI, VT, ME, NH	National Government Services, Inc. (NGS)		
15	KY, OH	CGS Administrators, LLC		

