Ontario Health | Santé Ontario

eClaims
Demandes de remboursement en ligne

Eligibility Form

Atezolizumab - Advanced or Metastatic Non-Small Cell Lung Cancer

(This form must be completed before the first dose is dispensed.)

1. Patient Profile

* Surname: .....

* Given Name: .....

* OHIN: ..... * Chart Number: .....

* Postal Code: .....

* Height (cm): ..... * Weight (kg): .....

* BSA (m^2): ..... * Gender: ○ Male ○ Female ○ Other

* Date of Birth: ....
Day Month Year

* Site:

* Attending Physician (MRP- Most Responsible Physician): .....

Requested Prior Approval ☐ Yes * Patient on Clinical Trial ○ Yes ○ No

Other (specify): .....

Specify Arm:
○ Standard of care arm ○ Experimental arm
○ Blinded / Unknown

Prior Approval Request

* Select the appropriate prior approval scenario:

○ 1-Unknown primary (submit pathology report and clinic note)
○ 2-Clinical document review (identify the patient history that needs to be reviewed against eligibility criteria in Additional Comments below)
○ 3-Regimen modification - schedule (complete questions a and b)
○ 4-Regimen modification - drug substitutions (complete questions a and c)
○ 5-Withholding a drug in combination therapy from start of treatment (complete questions d, e and f)
○ 6-Maintenance therapy delay (submit clinic note)
○ 7-Prior systemic therapy clinical trials (complete question g)
○ 8-Modification due to supply interruption/drug shortage
○ 9-Supplemental doses requested
○ Other (specify)

All relevant supporting documentation must be submitted at the time of prior approval. Documentation may include a pathology report, clinic note, and/or CT scans.

a. Co-morbidities / toxicity / justification:

b. Intended regimen schedule: .....

c. Intended regimen: .....

d. Drug(s) to be held: .....

e. Rationale for holding drug(s): .....

f. Intention to introduce drug at a later date? ☐ Yes

g. Prior clinical trial identifier (e.g., NCT ID, trial name) and treatment description (e.g., arm, drug/regimen): .....

h. Anticipated date of first treatment: .... Day Month Year

i. Additional comments:

2. Eligibility Criteria

- Atezolizumab is used for the treatment of patients who have locally advanced or metastatic non-small cell lung cancer whose disease has progressed on or after cytotoxic chemotherapy. ☐ Yes
- Patients with EGFR or ALK mutations should be treated with targeted agents followed by cytotoxic chemotherapy prior to receiving atezolizumab.

3. Baseline Information

a. ECOG Performance Status at the time of enrolment ○ 0 ○ 1 ○ 2

b. Driver mutation status ○ EGFR positive ○ ALK positive ○ EGFR and ALK-negative or unknown

c. If the patient is EGFR mutation positive, please select the previous targeted therapy/therapies received: ☐ Afatinib ☐ Gefitinib ☐ Osimertinib

d. If the patient is ALK mutation positive, please select the previous targeted therapy/therapies received: ☐ Alectinib ☐ Crizotinib ☐ Ceritinib

e. Has the patient received any of the following drugs for advanced lung cancer: docetaxel, gemcitabine, paclitaxel, pemetrexed or vinorelbine? ○ Yes ○ No

f. Atezolizumab is being given as the ___ line of treatment. (Note: Platinum doublet followed by pemetrexed maintenance constitutes one line of treatment.) ○ 2nd ○ 3rd ○ 4th line and greater

g. PD-L1 expression level ○ Not tested ○ <1% ○ 1-49% ○ >=50%

4. Funded Dose

Atezolizumab 840 mg as an intravenous (IV) infusion every 2 weeks, 1200 mg as an IV infusion or 1875 mg subcutaneously (SC) every 3 weeks, or 1680 mg as an IV infusion every 4 weeks.

Treatment with atezolizumab should be continued until unacceptable toxicity or confirmed disease progression.

[ST-QBP regimen code: ATEZ]

5. Notes

1. Ontario Health (Cancer Care Ontario) will fund one line of atezolizumab, nivolumab, nivolumab plus ipilimumab, or pembrolizumab for advanced non-small cell lung cancer. Patients who were treated with durvalumab (or other anti-PD1/PD-L1 therapy) in the curative setting must have a disease free interval of 6 months or greater in order to be considered for funding under this policy.

2. Atezolizumab is funded for single agent use only.

3. It is recommended that atezolizumab be used after treatment with a platinum-based therapy.

4. Atezolizumab is not funded for patients who have confirmed disease progression after receiving a prior anti-PD-1 inhibitor in the advanced setting.

5. For patients who stop atezolizumab without disease progression, continuation of atezolizumab will be funded provided that no other treatment is given in between.

6. The IV and SC formulations of atezolizumab are not interchangeable.

6. FAQs

1. **My patient is currently receiving atezolizumab through non-publicly funded means. Can my patient be transitioned over to receive funding through the New Drug Funding Program (NDFP)?**

   Provided the funding criteria were met at the time of treatment initiation and the patient's disease has not progressed, your patient may be eligible for continued coverage of atezolizumab through the NDFP.

   Patients who meet the eligibility criteria may be transitioned to NDFP funding through a regular eClaims enrolment. If there is clinical uncertainty regarding eligibility, these requests may be submitted as a prior approval including a clinic note from the time of initiation as well as the most recent clinic note outlining the response to treatment (if able to assess).

2. **Can my patient be treated with pembrolizumab or nivolumab upon progression on atezolizumab?**

   Ontario Health (Cancer Care Ontario) will fund one line of atezolizumab, nivolumab, nivolumab plus ipilimumab, or pembrolizumab for advanced non-small cell lung cancer. Patients who completed a course of pembrolizumab, nivolumab plus ipilimumab, or nivolumab for advanced NSCLC through non-publicly funded means will not be funded for atezolizumab under this policy.

3. **My patient needs to take a treatment break from atezolizumab. Will resumption of treatment be funded?**

   For patients who stop atezolizumab without disease progression, continuation of atezolizumab will be funded provided that no other treatment is given in between.

4. **My patient is currently receiving atezolizumab on an every-3-week schedule. Can my patient be transitioned over to the every-4-week schedule?**

   The decision to switch should be based on a discussion between the clinician and patient. Switches between schedules will be eligible for continued funding provided the patient's disease has not progressed.

5. **My patient is currently receiving atezolizumab IV. Can my patient be switched over to the SC formulation for the remainder of their treatment cycles?**

   At the discretion of the treating physician, patients currently on atezolizumab IV may be switched over to the SC formulation for the remainder of the funded doses according to the specific policy. Sites are not required to re-enroll in the updated enrolment form to submit treatment claims for atezolizumab SC.

7. Supporting Documents

None required at the time of enrolment.

In the event of an audit, the following should be available to document eligibility:

- CT scans every 3 to 6 months, along with clinic notes confirming no disease progression.
- In instances where there is pseudoprogression, a clinic note documenting the assessment and decision to continue, and the subsequent CT scan confirming no disease progression.

Signature of Attending Physician (MRP-Most Responsible Physician): .....

....
Day Month Year

Form 1090