BlueCross BlueShield
Federal Employee Program
Blue Cross Blue Shield Association
750 9th St NW, Suite 900
Washington, D.C. 20001
1-800-624-5060
Fax 1-877-378-4727

# 5.21.229

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| **Section:** | Prescription Drugs | **Effective Date:** | April 1, 2025 |
| **Subsection:** | Antineoplastic Agents | **Original Policy Date:** | September 13, 2024 |
| **Subject:** | Lazcluze | **Page:** | 1 of 5 |

***Last Review Date:*** March 7, 2025

# Lazcluze

## Description

### Lazcluze (lazertinib)

**Background**
Lazcluze (lazertinib) is a kinase inhibitor of epidermal growth factor receptor (EGFR) that inhibits EGFR exon 19 deletions and exon 21 L858R substitution mutations at lower concentrations than wild-type EGFR. In human non-small cell lung cancer (NSCLC) cells and mouse xenograft models of EGFR exon 19 deletions or EGFR L858R substitution mutations, Lazcluze demonstrated anti-tumor activity and treatment in combination with amivantamab increased in vivo anti-tumor activity compared to either agent alone (1).

**Regulatory Status**
FDA-approved indication: Lazcluze is a kinase inhibitor indicated in combination with amivantamab for the first-line treatment of adult patients with locally advanced or metastatic non-small cell lung cancer (NSCLC) with epidermal growth factor receptor (EGFR) exon 19 deletions or exon 21 L858R substitution mutations, as detected by an FDA-approved test (1).

Lazcluze has warnings regarding the following: venous thromboembolic events (VTE), interstitial lung disease (ILD)/pneumonitis, dermatologic adverse reactions, ocular adverse reactions, and embryo-fetal toxicity. When initiating treatment with Lazcluze in combination with amivantamab, administer anticoagulant prophylaxis to prevent VTE events for the first four months of treatment (1).

Lazcluze can cause fetal harm when administered in pregnant women. Females of reproductive potential should be advised to use effective contraception during treatment with Lazcluze and

for 3 weeks after the last dose. Males with female partners of reproductive potential should be advised to use effective contraception during treatment with Lazcluze and for 3 weeks after the last dose (1).

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

**Related policies**
Erlotinib, Exkivity, Gilotrif, Iressa, Tagrisso, Vizimpro

## Policy

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

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

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

## Prior-Approval Requirements

**Age** 18 years of age and older

**Diagnosis**

Patient must have the following:

1. Locally advanced or metastatic non-small cell lung cancer (NSCLC)
    a. EGFR exon 19 deletions or exon 21 L858R substitution mutations, as detected by an FDA-approved test
    b. Used as first-line treatment in combination with Rybrevant (amivantamab)

**AND ALL** of the following:

1. Prescriber agrees to administer anticoagulant prophylaxis to prevent venous thromboembolic events (VTE) for at least the first four months of treatment

2. Female patients of reproductive potential **only**: patient will be advised to use effective contraception during treatment with Lazcluze and for 3 weeks after the last dose
3. Male patients with female partners of reproductive potential **only**: patient will be advised to use effective contraception during treatment with Lazcluze and for 3 weeks after the last dose

## Prior–Approval *Renewal* Requirements

**Age** 18 years of age and older

**Diagnosis**

Patient must have the following:

1. Locally advanced or metastatic non-small cell lung cancer (NSCLC)
    a. **NO** disease progression or unacceptable toxicity

**AND ALL** of the following:

1. Prescriber agrees to monitor for signs and symptoms of venous thromboembolic events (VTE)
2. Female patients of reproductive potential **only**: patient will be advised to use effective contraception during treatment with Lazcluze and for 3 weeks after the last dose
3. Male patients with female partners of reproductive potential **only**: patient will be advised to use effective contraception during treatment with Lazcluze and for 3 weeks after the last dose

## Policy Guidelines

### Pre–PA Allowance

None

### Prior–Approval Limits

**Quantity** 240 mg per day

**Duration** 12 months

## Prior–Approval *Renewal* Limits

Same as above

## Rationale

**Summary**

Lazcluze (lazertinib) is a kinase inhibitor of epidermal growth factor receptor (EGFR). It is indicated for the treatment of adult patients with locally advanced or metastatic NSCLC with EGFR exon 19 deletions or exon 21 L858R substitution mutations. Lazcluze has warnings regarding the following: venous thromboembolic events (VTE), interstitial lung disease (ILD)/pneumonitis, dermatologic adverse reactions, ocular adverse reactions, and embryo-fetal toxicity. The safety and effectiveness of Lazcluze in pediatric patients less than 18 years of age have not been established (1).

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

**References**

1. Lazcluze [package insert]. Horsham, PA: Janssen Biotech, Inc.; August 2024.
2. NCCN Drugs & Biologics Compendium® Lazertinib 2025. National Comprehensive Cancer Network, Inc. Accessed on January 15, 2025.

## Policy History

| Date | Action |
|---|---|
| September 2024 | Addition to PA |
| December 2024 | Annual review and reference update |
| March 2025 | Annual review and reference update |

## Keywords

**This policy was approved by the FEP® Pharmacy and Medical Policy Committee on March 7, 2025 and is effective on April 1, 2025.**