

NHL: Chronic Lymphocytic Leukemia (CLL)/ Small Lymphocytic Lymphoma (SLL) Pathways

Patient Name: _____ Date of Birth: _____

Member Number: _____ Treatment Start Date: _____

ICD-10 Code: _____ Pathology: _____

Lymphoma Stage: __0 __0-E __0-X __0-XE __IA __IA-E __IA-X __IA-XE __IB __IB-E __IB-X __IB-XE __IIA __IIA-E __IIA-X __IIA-XE __IIB __IIB-E __IIB-X __IIB-XE __IIIA __IIIA-E __IIIA-X __IIIA-XE __IIIB __IIIB-E __IIIB-X __IIIB-XE __IVA __IVA-E __IVA-X __IVA-XE __IVB __IVB-E __IVB-X __IVB-XE __NS __Recurrent

Leukemia Stage: __NS (No stage) __Recurrent

Line of Treatment: __First Line __Second Line __Third Line __Third Line+ __Maintenance

ECOG Performance Status: __0 __1 __2 __3 __4

Biomarkers:

11q deletion: __Absent __Present

17p deletion: __Absent __Present

CD20 Status: __Negative __Positive

TP53 status: __Mutation Absent __Mutation Present

First line of therapy (1st line) | With 17p Deletion

Ibrutinib (Imbruvica)

First line of therapy (1st line) | Without 17p Deletion

BR: bendamustine (Bendeka, Treanda) and rituximab (Rituxan)

FCR: fludarabine (Fludara), cyclophosphamide (Cytoxan), and rituximab (Rituxan)

Ibrutinib (Imbruvica)

Indications to initiate treatment may include (not limited to):

- WBC elevation above $200-300 \times 10^9$
- Signs of leukostasis
- Lymphocyte doubling time of less than 6 months
- In low or intermediate risk disease:
 - Significant disease-related symptoms such as severe fatigue, weight loss, night sweats, otherwise unexplained fever
 - Signs of end-organ damage
 - Significant or progressive bulky disease, such as massive splenomegaly (≥ 6 cm below the costal margin) or massive lymphadenopathy (> 10 cm in longest diameter)
 - Clinically significant progressive or symptomatic anemia or thrombocytopenia
 - Not caused by autoimmune etiology, unless poor response to conventional immunosuppressive therapy

High risk disease, particularly with progressive cytopenias

Note: Pathway lists are solely for the purpose of eligibility for enhanced reimbursement and are independent of specific health plan medical policy coverage criteria. Health plan medical policy/clinical guidelines should be consulted to determine whether proposed services will be covered.



NHL: Chronic Lymphocytic Leukemia (CLL)/ Small Lymphocytic Lymphoma (SLL) Pathways (Continued)

Second and subsequent lines of therapy (2nd line +) | With 17p Deletion

___ Ibrutinib (Imbruvica)

Second and subsequent lines of therapy (2nd line +) | Without 17p Deletion

___ **BR:** bendamustine (Bendeka, Treanda) and rituximab (Rituxan)

___ Ibrutinib (Imbruvica)

Indications to initiate treatment may include (not limited to):

- WBC elevation above $200-300 \times 10^9$
- Signs of leukostasis
- Lymphocyte doubling time of less than 6 months
- In low or intermediate risk disease:
 - Significant disease-related symptoms such as severe fatigue, weight loss, night sweats, otherwise unexplained fever
 - Signs of end-organ damage
 - Significant or progressive bulky disease, such as massive splenomegaly (≥ 6 cm below the costal margin) or massive lymphadenopathy (> 10 cm in longest diameter)
 - Clinically significant progressive or symptomatic anemia or thrombocytopenia
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