



Optum Cancer Therapy Pathways Program

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Overview

Cancer Therapy Pathways Program

With the rapid approval of new therapies, along with the rising cost of cancer care, pathways serve a critical role in the delivery of high-quality and high-value cancer treatments while reducing an unwarranted variation in care.

The Optum Cancer Therapy Pathways Program aims to improve quality and value in cancer care by identifying anti-cancer regimens supported by evidence-based guidelines to help reduce total cost of care and improve outcomes.

The program's regimens are selected on the basis of clinical benefit (efficacy) and side-effect profile (toxicity). Among regimens with comparable efficacy and toxicity, additional consideration is given to the frequency of hospitalizations during therapy, duration of therapy, drug costs and total cost of care.

NOTE: Pathways are independent of specific health plan medical policy coverage criteria. Health plan policy/ clinical guidelines should be consulted to determine whether proposed services are covered. Biosimilars or alternate formulations (along with the reference products) are considered on pathway unless otherwise specified by health plan formularies, medical policies, or preferred product rules.

Care decisions are between the physician and the patient.

The Cancer Therapy Pathways Program is not a substitute for the experience and judgment of a physician or other health care professional. Any clinician participating in the program must use independent medical judgment in the context of individual clinical circumstances to determine any patient's care or treatment. Care decisions are between the physician and patient.

B-Cell Lymphomas

Diffuse Large B-Cell Lymphoma (include histological transformation and follicular grade 3 (high-grade))**

1st Line of Therapy

- Rituximab-CHOP (Cyclophosphamide, Doxorubicin, Vincristine, Prednisone)
- Rituximab-mini-CHOP (Cyclophosphamide, Doxorubicin, Vincristine, Prednisone)
- Rituximab-DA-EPOCH (Etoposide, Prednisone, Vincristine, Cyclophosphamide, Doxorubicin)
(For Primary Mediastinal B-Cell Lymphoma (PMBCL) Only)

Diffuse Large B-Cell Lymphoma with translocations of MYC and BCL2 and/or BCL6 (double-/triple-hit lymphoma)**

- Rituximab-DA-EPOCH (Etoposide, Prednisone, Vincristine, Cyclophosphamide, Doxorubicin)

***Therapies that are administered at Centers of Excellence, including stem cell transplant or CAR T-cell therapy, are not included in pathways. Patients eligible for transplant or CAR T-cell therapy should be referred appropriately for evaluation.*

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Follicular Lymphoma (Grade 1–2)**

1st Line of Therapy

- Bendamustine + Rituximab (BR)
- Rituximab (weekly for 4 doses)

2nd and Subsequent Lines of Therapy

- Bendamustine + Rituximab (BR)
- CHOP (Cyclophosphamide, Doxorubicin, Vincristine, Prednisone) + Rituximab
- CVP (Cyclophosphamide, Vincristine, Prednisone) + Rituximab
- Rituximab
- Bendamustine + Obinutuzumab (rituximab refractory disease only)

*** Therapies that are administered at Centers of Excellence, including stem cell transplant or CAR T-cell therapy, are not included in pathways. Patients eligible for transplant or CAR T-cell therapy should be referred appropriately for evaluation.*

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Mantle Cell Lymphoma**

1st Line of Therapy

- Nordic Regimen (Dose-Intensified Induction Immunochemotherapy with Rituximab + Cyclophosphamide, Vincristine, Doxorubicin, Prednisone [Maxi-CHOP]) Alternating with Rituximab + High-Dose Cytarabine
- Hyper-CVAD (Cyclophosphamide, Vincristine, Doxorubicin and Dexamethasone Alternating with High-Dose Methotrexate and Cytarabine) + Rituximab
- Bendamustine + Rituximab
- VR-CAP (Bortezomib, Rituximab, Cyclophosphamide, Doxorubicin and Prednisone)

Maintenance After 1st Line of Therapy

- Rituximab

2nd Line of Therapy

- Bendamustine + Rituximab (BR)
- Acalabrutinib
- Ibrutinib
- Zanubrutinib

3rd and Subsequent Lines of Therapy

- Bendamustine + Rituximab (BR)
- Acalabrutinib
- Ibrutinib
- Zanubrutinib

*** Therapies that are administered at Centers of Excellence, including stem cell transplant or CAR T-cell therapy, are not included in pathways. Patients eligible for transplant or CAR T-cell therapy should be referred appropriately for evaluation.*

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Marginal Zone Lymphoma**

1st Line of Therapy

- Antimicrobial therapy as indicated (e.g. H. Pylori eradication therapy (for Gastric MALT only))
- Bendamustine + Rituximab (BR)
- Rituximab (weekly for 4 doses)

2nd and Subsequent Lines of Therapy (Non-Refractory Disease)

- Bendamustine + Rituximab (BR)
- CHOP (Cyclophosphamide, Doxorubicin, Vincristine, Prednisone) + Rituximab
- CVP (Cyclophosphamide, Vincristine, Prednisone) + Rituximab
- Rituximab
- Bendamustine + Obinutuzumab (rituximab refractory disease)

*** Therapies that are administered at Centers of Excellence, including stem cell transplant or CAR T-cell therapy, are not included in pathways. Patients eligible for transplant or CAR T-cell therapy should be referred appropriately for evaluation.*

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Biliary Tract Cancers (Gallbladder, Intrahepatic and Extrahepatic Cholangiocarcinoma)

Adjuvant Therapy

- Capecitabine +/- XRT

Unresectable/Metastatic

1st Line of Therapy

- Gemcitabine + Cisplatin
- Durvalumab + Gemcitabine + Cisplatin
- Pembrolizumab + Gemcitabine + Cisplatin

2nd and Subsequent Lines of Therapy

- Fluorouracil/Leucovorin + Oxaliplatin (FOLFOX)
- Ivosidenib (in IDH1 Mutation Cholangiocarcinoma)

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Bladder Cancer

Non-Muscle Invasive, Neoadjuvant/Adjuvant

- Intravesical BCG (Bacillus Calmette-Guerin)
- Intravesical Gemcitabine

Non-Muscle Invasive, Maintenance

- Intravesical BCG (Bacillus Calmette-Guerin)

Muscle Invasive, Neoadjuvant/Adjuvant

- Gemcitabine + Cisplatin
- Nivolumab PD-L1 $\geq 1\%$ (high-risk, adjuvant only)

Radiosensitizing Chemotherapy for Organ-Preserving Chemoradiation

- Cisplatin + Fluorouracil (5FU)
- Gemcitabine

Locally Advanced or Metastatic

1st Line of Therapy

- Gemcitabine + Cisplatin or Carboplatin
- Pembrolizumab + enfortumab vedotin-ejfv

Maintenance Post 1st Line of Therapy and No Progression

- Avelumab

2nd and Subsequent Lines of Therapy

- Gemcitabine + Cisplatin or Carboplatin (if platinum-based therapy not used previously)
- Enfortumab Vedotin-ejfv (if not previously used)
- Erdafitinib (FGFR 3 mutations)
- Pembrolizumab (if IO not used previously)
- Nivolumab (if IO not used previously)
- Avelumab (if IO not used previously)

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Breast Cancer

Neoadjuvant/Adjuvant

HER2 Negative:

- Doxorubicin + Cyclophosphamide (dose dense) → Paclitaxel weekly (ddAC → weekly T)
- Doxorubicin + Cyclophosphamide (dose dense) → Paclitaxel every 2 weeks (ddAC → q2w T)
- Docetaxel + Cyclophosphamide (TC)
- Olaparib (for BRCA 1/2 mutation positive; adjuvant therapy only)
- Preoperative Pembrolizumab + Carboplatin + Paclitaxel, followed by Pembrolizumab + Cyclophosphamide + Doxorubicin, followed by adjuvant Pembrolizumab (for high-risk TNBC, stage II-III, only)
- Preoperative Pembrolizumab + Carboplatin + Paclitaxel, followed by Pembrolizumab + Cyclophosphamide + Epirubicin, followed by adjuvant Pembrolizumab (for high-risk TNBC, stage II-III, only)

HER2 Positive:

- Doxorubicin + Cyclophosphamide → Paclitaxel weekly + Trastuzumab (AC → TH)
- Docetaxel + Carboplatin + Trastuzumab (TCH)
- Paclitaxel + Trastuzumab

Adjuvant (Residual Disease Post-Neoadjuvant Treatment)

Triple negative breast cancer (TNBC):

- Capecitabine

HER2 Positive (to completion of 1 yr of HER2 therapy):

- Ado-trastuzumab Emtansine (T-DM1)
- Trastuzumab

Adjuvant (No Residual Disease Post-Neoadjuvant Treatment)

HER2 Positive:

- Trastuzumab to completion 1 yr of HER2 therapy

Metastatic and Recurrent — Endocrine Therapy

HER2 Negative: 1st Line of Therapy

- Fulvestrant + Anastrozole

- Fulvestrant + Letrozole
- Anastrozole + Palbociclib
- Letrozole + Palbociclib
- Exemestane + Palbociclib
- Anastrozole + Abemaciclib
- Letrozole + Abemaciclib
- Exemestane + Abemaciclib
- Anastrozole + Ribociclib
- Letrozole + Ribociclib
- Exemestane + Ribociclib

HER2 Negative: 1st + Subsequent Lines of Therapy

- Anastrozole
- Letrozole
- Exemestane
- Tamoxifen
- Fulvestrant

HER2 Negative: 2nd + Subsequent Lines of Therapy

- Anastrozole
- Letrozole
- Exemestane
- Tamoxifen
- Fulvestrant
- Fulvestrant + Palbociclib
- Fulvestrant + Abemaciclib
- Fulvestrant + Ribociclib

HER2 positive: 1st + Subsequent Lines of Therapy

- Anastrozole + Trastuzumab
- Letrozole + Trastuzumab
- Exemestane + Trastuzumab
- Anastrozole + Lapatinib
- Letrozole + Lapatinib
- Exemestane + Lapatinib

Metastatic and Recurrent — Chemotherapy

HER2 Negative: 1st + Subsequent Lines of Therapy

- Doxorubicin
- Paclitaxel
- Docetaxel
- Capecitabine
- Gemcitabine
- Vinorelbine
- Olaparib or talzoparib (Germline BRCA 1/2 Mutation Positive)
- Fam-trastuzumab deruxtecan--nxki (HER2 IHC 1+ or 2+ and ISH negative, second and subsequent lines of therapy)

HER2 Negative: 3rd + Subsequent Lines of Therapy

- Sacituzumab Govitecan-hziy (HR+, HER 2 negative)

HER2 Negative, Triple Negative Breast Cancer (TNBC): 1st Line and Subsequent Lines of Therapy

- Cisplatin or Carboplatin (PD-L1 CPS < 10 and germline BRCA 1/2 mutation)
- Pembrolizumab + Paclitaxel (CPS ≥ 10)
- Pembrolizumab + Gemcitabine + Carboplatin (CPS ≥ 10)
- Sacituzumab Govitecan-hziy (after 2 prior therapies for metastatic disease)
- Fam-trastuzumab deruxtecan—nxki (HER2 IHC 1+ or 2+ and ISH negative, second and subsequent lines of therapy)

HER2 Positive: 1st Line of Therapy

- Docetaxel + Trastuzumab + Pertuzumab
- Paclitaxel + Trastuzumab + Pertuzumab

HER2 Positive: 2nd Line of Therapy

- Ado-Trastuzumab Emtansine (T-DM1)
- Fam-trastuzumab deruxtecan-nxki
- Tucatinib + trastuzumab + capecitabine (In patients with CNS involvement)

HER2 Positive: 3rd + Subsequent Lines of therapy

- Tucatinib + trastuzumab + capecitabine
- Ado-Trastuzumab Emtansine (T-DM1)

HER2 Positive: 4th + Subsequent Lines of therapy

- Paclitaxel + Trastuzumab
- Vinorelbine + Trastuzumab
- Gemcitabine + Trastuzumab
- Capecitabine + Trastuzumab

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Colon/Rectal Cancer

Adjuvant

- Fluorouracil + Leucovorin + Oxaliplatin (FOLFOX)
- Capecitabine + Oxaliplatin (CAPEOX)
- Fluorouracil (5-FU)/Leucovorin

Metastatic — pMMR/ MSI-S

RAS/BRAF Wild Type or Mutant or Unknown

1st and Subsequent Lines of Therapy

- Fluorouracil + Leucovorin + Oxaliplatin (FOLFOX) +/- Bevacizumab
- Fluorouracil + Leucovorin + Irinotecan (FOLFIRI) +/- Bevacizumab
- Fluorouracil + Leucovorin +/- Bevacizumab
- Capecitabine

2nd and Subsequent Lines of Therapy

- Encorafenib + Cetuximab* (BRAF V600E mut+)
- Encorafenib + Panitumumab* (BRAF V600E mut+)

*If no prior progression on KRAS/NRAS/BRAF WT therapy

3rd and Subsequent Lines of Therapy

- Trifluridine + Tipiracil + Bevacizumab

RAS/BRAF Wild Type

1st Line Left-sided Tumor Only and Subsequent Lines of Therapy Regardless of Tumor Location

- Fluorouracil + Leucovorin + Oxaliplatin (FOLFOX) + Cetuximab*
- Fluorouracil + Leucovorin + Irinotecan (FOLFIRI) + Cetuximab*
- Fluorouracil + Leucovorin + Oxaliplatin (FOLFOX) + Panitumumab*
- Fluorouracil + Leucovorin + Irinotecan (FOLFIRI) + Panitumumab*

(*Also for patients have the received treatment with a checkpoint inhibitor, had a history of progression on a checkpoint inhibitor, or is ineligible for a checkpoint inhibitor)

Metastatic — dMMR/ MSI-H or POLE/POLD1 Mutation Positive

RAS/BRAF Wild Type or Mutant or Unknown 1st Line of Therapy

- Pembrolizumab[#]

[#] If no prior progression on immunotherapy therapy

2nd and Subsequent Lines of Therapy

- FOLFOX +/- Bevacizumab
- FOLFIRI +/- Bevacizumab
- 5-FU + Leucovorin +/- Bevacizumab
- Capecitabine
- Encorafenib + Cetuximab* (BRAF V600E mut+)
- Encorafenib + Panitumumab* (BRAF V600E mut+)

3rd and Subsequent Lines of Therapy

- Trifluridine + Tipiracil + Bevacizumab

RAS/BRAF Wild Type

2nd and Subsequent Lines of Therapy

- FOLFOX + Cetuximab*
- FOLFIRI + Cetuximab*
- FOLFOX + Panitumumab*
- FOLFIRI + Panitumumab*

* If no prior progression on KRAS/NRAS/BRAF WT therapy

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Chronic Lymphocytic Leukemia (CLL)/ Small Lymphocytic Lymphoma (SLL)

1st line of therapy

- Ibrutinib
- Acalabrutinib
- Zanubrutinib
- Venetoclax + Obinutuzumab
- Bendamustine + Rituximab (without del(17p)/TP53 mutation)

2nd and Subsequent lines of therapy

- Ibrutinib
- Acalabrutinib
- Zanubrutinib
- Venetoclax + Rituximab
- Bendamustine + Rituximab (without del(17p)/TP53 mutation)

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Chronic Myeloid Leukemia

Chronic Phase

1st Line Therapy (all risk categories)

- Imatinib

2nd Line and Subsequent Therapy

- Dasatinib
- Nilotinib
- Asciminib (T315I mutation only)
- Asciminib (third and subsequent)

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Esophageal Cancer

Perioperative

- Capecitabine + Oxaliplatin
- Fluorouracil +/- Leucovorin, Cisplatin
- Fluorouracil +/- Leucovorin, Oxaliplatin
- Fluorouracil + Leucovorin + Oxaliplatin + Docetaxel (FLOT)

Preoperative or Definitive Chemoradiotherapy

- Capecitabine + Cisplatin + RT
- Capecitabine + Oxaliplatin + RT
- Carboplatin + Paclitaxel + RT
- Fluorouracil +/- Leucovorin + Cisplatin + RT
- Fluorouracil +/- Leucovorin + Oxaliplatin + RT

Recurrent or Metastatic Disease

HER2 Positive (HER2+) Disease: 1st Line of Therapy

- Capecitabine + Cisplatin + Trastuzumab
- Capecitabine + Oxaliplatin + Trastuzumab
- Fluorouracil +/- Leucovorin + Oxaliplatin + Trastuzumab
- Fluorouracil +/- Leucovorin + Cisplatin + Trastuzumab
- Capecitabine + Cisplatin + Trastuzumab + Pembrolizumab (CPS $\geq$ 1)
- Capecitabine + Oxaliplatin + Trastuzumab + Pembrolizumab (CPS $\geq$ 1)
- Fluorouracil +/- Leucovorin + Oxaliplatin + Trastuzumab + Pembrolizumab (CPS $\geq$ 1)
- Fluorouracil +/- Leucovorin + Cisplatin + Trastuzumab + Pembrolizumab (CPS $\geq$ 1)

HER2 Negative (HER2-) or Unknown Disease: 1st Line of Therapy

- Capecitabine + Cisplatin
- Capecitabine + Oxaliplatin
- Capecitabine + Cisplatin + Nivolumab (Squamous Cell CPS $\geq$ 1)
- Capecitabine + Oxaliplatin + Nivolumab (Adenocarcinoma CPS $\geq$ 5 or Squamous Cell CPS $\geq$ 1)
- Fluorouracil +/- Leucovorin + Oxaliplatin
- Fluorouracil +/- Leucovorin + Cisplatin
- Fluorouracil +/- Leucovorin + Oxaliplatin + Nivolumab (Adenocarcinoma CPS $\geq$ 5 or Squamous Cell CPS $\geq$ 1)

- Fluorouracil +/- Leucovorin + Cisplatin + Nivolumab (Squamous Cell CPS ≥ 1)
- Capecitabine + Oxaliplatin + Pembrolizumab (CPS ≥ 10)
- Fluorouracil ± Leucovorin + Cisplatin+ Pembrolizumab (CPS ≥ 10)
- Fluorouracil ± Leucovorin + Oxaliplatin + Pembrolizumab (CPS ≥ 10)
- Capecitabine + Cisplatin + Pembrolizumab (CPS ≥ 10)

HER2- and HER2+ Disease: 2nd + Subsequent Lines of Therapy

- Docetaxel
- Irinotecan
- Paclitaxel
- Paclitaxel + Ramucirumab (for adenocarcinoma)
- Fam-trastuzumab deruxtecan (HER2+ Disease and adenocarcinoma only)

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Gastric Cancer

Perioperative

- Capecitabine + Oxaliplatin
- Fluorouracil +/- Leucovorin + Cisplatin
- Fluorouracil +/-Leucovorin + Oxaliplatin
- Fluorouracil + Leucovorin + Oxaliplatin + Docetaxel (FLOT)

Postoperative Chemoradiotherapy

- Capecitabine + RT
- Fluorouracil + RT

Postoperative Chemotherapy

- Capecitabine
- Capecitabine + Oxaliplatin
- Fluorouracil

Recurrent or Metastatic Disease

HER2 Positive (HER2+) Disease: 1st Line of Therapy

- Fluorouracil +/- Leucovorin + Cisplatin + Trastuzumab
- Fluorouracil +/- Leucovorin + Oxaliplatin + Trastuzumab
- Capecitabine + Cisplatin + Trastuzumab
- Capecitabine + Oxaliplatin + Trastuzumab
- Capecitabine + Cisplatin + Trastuzumab + Pembrolizumab (CPS $\geq$ 1)
- Capecitabine + Oxaliplatin + Trastuzumab + Pembrolizumab (CPS $\geq$ 1)
- Fluorouracil +/- Leucovorin + Oxaliplatin + Trastuzumab + Pembrolizumab (CPS $\geq$ 1)
- Fluorouracil +/- Leucovorin + Cisplatin + Trastuzumab + Pembrolizumab (CPS $\geq$ 1)

HER2 Negative (HER2-) or Unknown Disease: 1st Line of Therapy

- Capecitabine + Oxaliplatin
- Capecitabine + Oxaliplatin + Nivolumab (CPS $\geq$ 5)
- Capecitabine + Oxaliplatin + Pembrolizumab (CPS $\geq$ 10)
- Capecitabine + Cisplatin
- Capecitabine + Cisplatin + Pembrolizumab (CPS $\geq$ 10)
- Fluorouracil +/- Leucovorin + Cisplatin

- Fluorouracil +/- Leucovorin + Cisplatin + Pembrolizumab (CPS ≥ 10)
- Fluorouracil +/- Leucovorin, Oxaliplatin
- Fluorouracil +/- Leucovorin, Oxaliplatin, Nivolumab, (CPS ≥ 5)
- Fluorouracil +/- Leucovorin + Oxaliplatin + Pembrolizumab (CPS ≥ 10)

HER2- and HER2+ Disease: 2nd and Subsequent Lines of Therapy

- Docetaxel
- Irinotecan
- Paclitaxel
- Paclitaxel + Ramucirumab
- Fam-trastuzumab deruxtecan (HER2+ disease only)

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Head and Neck Cancer

Primary Definitive Therapy

Non-Nasopharyngeal

- Cisplatin + Concurrent Radiation Therapy

Nasopharyngeal

- Cisplatin + Concurrent Radiation Therapy
- Cisplatin + Gemcitabine

Adjuvant Therapy

Non-Nasopharyngeal

- Cisplatin + Concurrent Radiation Therapy

Nasopharyngeal

- Cisplatin + Fluorouracil (5FU)
- Carboplatin + Fluorouracil (5FU)

Recurrent/Metastatic/Unresectable

Non-Nasopharyngeal: 1st Line of Therapy

- Cisplatin or Carboplatin + Fluorouracil (5FU) + Cetuximab
- Cisplatin + Fluorouracil (5FU)
- Cisplatin or Carboplatin + Docetaxel
- Cisplatin or Carboplatin + Paclitaxel
- Cisplatin or Carboplatin + Fluorouracil (5FU) + Pembrolizumab
- Carboplatin + Paclitaxel + Pembrolizumab
- Pembrolizumab (CPS $\geq$ 1 only)

Non-Nasopharyngeal: 2nd and Subsequent Lines of Therapy

- Cisplatin or Carboplatin + Fluorouracil (5FU) + Cetuximab
- Cisplatin + Fluorouracil (5FU)
- Cisplatin or Carboplatin + Docetaxel
- Cisplatin or Carboplatin + Paclitaxel
- Nivolumab (if IO not used previously)
- Pembrolizumab (if IO not used previously)

Nasopharyngeal: 1st Line of Therapy

- Cisplatin + Gemcitabine
- Toripalimab + Cisplatin + Gemcitabine
- Pembrolizumab + Cisplatin + Gemcitabine
- Nivolumab + Cisplatin + Gemcitabine

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Hepatocellular Carcinoma

Unresectable, Not a Transplant Candidate, Metastatic Disease, Inoperable by PS or Comorbidity

1st Line of Therapy

- Atezolizumab + Bevacizumab*
- Durvalumab +/- Tremelimumab

**For patients that have not received treatment with a checkpoint inhibitor.*

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Hodgkin Lymphoma (HL)

1st Line of Therapy

- Doxorubicin + Bleomycin + Vinblastine + Dacarbazine (ABVD)
- Doxorubicin + Vinblastine + Dacarbazine (AVD)
- Nivolumab + Doxorubicin + Vinblastine + Dacarbazine (Nivo + AVD)

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Kidney Cancer

Adjuvant (Clear Cell)

- Pembrolizumab

Relapsed or Metastatic (Clear Cell)

1st Line of Therapy (all risk levels)

- Axitinib + Avelumab
- Axitinib + Pembrolizumab
- Cabozantinib + Nivolumab
- Lenvatinib + Pembrolizumab
- Nivolumab + Ipilimumab

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Non-Small Cell Lung Cancer

Neoadjuvant/Adjuvant

Nonsquamous

- Nivolumab + Carboplatin or Cisplatin + Paclitaxel (Neoadjuvant only)
- Nivolumab + Carboplatin or Cisplatin + Pemetrexed (Neoadjuvant only)
- Cisplatin + Vinorelbine
- Cisplatin or Carboplatin + Pemetrexed ± Concurrent Radiation Therapy (RT)
- Carboplatin + Paclitaxel ± Concurrent Radiation Therapy (RT)
- Cisplatin + Etoposide + Concurrent Radiation Therapy (RT)

Squamous

- Nivolumab + Carboplatin or Cisplatin + Paclitaxel (Neoadjuvant only)
- Nivolumab + Carboplatin or Cisplatin + Gemcitabine (Neoadjuvant only)
- Cisplatin + Vinorelbine
- Carboplatin + Paclitaxel ± Concurrent Radiation Therapy (RT)
- Cisplatin + Etoposide + Concurrent Radiation Therapy (RT)

Adjuvant (only, completely resected)

- Durvalumab (tumors that were ≥4 cm)
- Osimertinib (stage IB – IIIA EGFR (exon 19del, L858R) directly following completion of adjuvant chemotherapy or are ineligible to receive platinum-based chemotherapy)
- Alectinib (stage II-IIIA or stage IIIB (T3, N2) NSCLC and positive for ALK rearrangement)

Ok Advanced/Metastatic: EGFR exon 19 deletion, L858R, S768I, L861Q, and/or G719X Mutation Positive

1st and Subsequent Lines of Therapy

- Dacomitinib
- Osimertinib

Advanced/Metastatic: ALK Rearrangement Positive

1st and Subsequent Lines of Therapy

- Alectinib
- Brigatinib
- Lorlatinib

Advanced/Metastatic (EGFR, ALK, RET Wild Type)

Nonsquamous: 1st Line of Therapy

- Pembrolizumab Single Agent (PD-L1 $\geq$ 50% only)
- Atezolizumab (PD-L1 $\geq$ 50% only)
- Cemiplimab-rwlc (PD-L1 $\geq$ 50% only)
- Carboplatin/Cisplatin + Pemetrexed + Pembrolizumab (regardless of PD-L1)
- Carboplatin/Cisplatin + Pemetrexed + Cemiplimab-rwlc, (regardless of PD-L1)
- Carboplatin/Cisplatin + Paclitaxel + Cemiplimab-rwlc (regardless of PD-L1)
- Carboplatin/Cisplatin + Pemetrexed (IO Ineligible)
- Carboplatin/Cisplatin + Paclitaxel (IO Ineligible)

Nonsquamous: Maintenance

- Pembrolizumab Single Agent (PD-L1 $\geq$ 50% only)
- Atezolizumab (PD-L1 $\geq$ 50% only)
- Cemiplimab-rwlc (PD-L1 $\geq$ 50% only)
- Cemiplimab-rwlc +/- Pemetrexed
- Pembrolizumab +/- Pemetrexed
- Pemetrexed

Nonsquamous: 2nd and Subsequent Lines of Therapy

- Docetaxel
- Pemetrexed
- Gemcitabine

Squamous: 1st Line of Therapy

- Pembrolizumab (PD-L1 $\geq$ 50% only)
- Atezolizumab (PD-L1 $\geq$ 50% only)
- Cemiplimab-rwlc (PD-L1 $\geq$ 50% only)
- Carboplatin + Paclitaxel + Pembrolizumab (regardless of PD-L1)
- Carboplatin/Cisplatin + Paclitaxel + Cemiplimab-rwlc (regardless of PD-L1)
- Carboplatin/Cisplatin + Paclitaxel (IO Ineligible)
- Carboplatin/Cisplatin + Gemcitabine (IO Ineligible)

Squamous: Maintenance

- Pembrolizumab (PD-L1 $\geq$ 50% only)
- Atezolizumab (PD-L1 $\geq$ 50% only)

- Cemiplimab-rwlc (PD-L1 ≥ 50% only)
- Cemiplimab-rwlc
- Pembrolizumab

Squamous: 2nd and Subsequent Lines of Therapy

- Docetaxel
- Gemcitabine

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Melanoma

Neoadjuvant (Resectable), Stage III

- Nivolumab 240mg + Ipilimumab 80mg x 2 cycles

Adjuvant (Resectable), Stage III

- Nivolumab
- Pembrolizumab

Adjuvant (Resectable) — (BRAF Mutated)

- Dabrafenib + Trametinib
- Nivolumab
- Pembrolizumab

Metastatic/Unresectable (BRAF Mutated/Symptomatic)

1st and Subsequent Lines of Therapy

- Dabrafenib + Trametinib
- Encorafenib + Binimetinib
- Vemurafenib + Cobimetinib

Metastatic/Unresectable (BRAF Wild-Type/Mutated/Unknown)

1st and Subsequent Lines of Therapy

- Nivolumab + Ipilimumab
- Nivolumab*
- Pembrolizumab*

**For patients that have not received treatment with a checkpoint inhibitor, had a history of progression on a checkpoint inhibitor < 3 months after treatment discontinuation.*

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Multiple Myeloma: Primary Therapy**

Transplant Eligible and Ineligible

- Bortezomib + Lenalidomide + Dexamethasone (VRD)
- Bortezomib + Cyclophosphamide + Dexamethasone (CyBorD or VCD)
- Bortezomib, Daratumumab, Lenalidomide, Dexamethasone (D+VRd) – transplant eligible only

Maintenance Therapy**

Transplant Eligible or Ineligible

- Lenalidomide
- Bortezomib

Relapsed or Refractory**

1st and 2nd Relapse

- Daratumumab + Lenalidomide + Dexamethasone (DRD)
- Daratumumab + Bortezomib + Dexamethasone (DVD)
- Elotuzumab + Pomalidomide + Dexamethasone (EPD)
- Carfilzomib + Lenalidomide + Dexamethasone (KRD)
- Pomalidomide + Bortezomib + Dexamethasone (PVD)
- Bortezomib + Lenalidomide + Dexamethasone (VRD)
- Bortezomib + Cyclophosphamide + Dexamethasone (CyBorD or VCD)
- Isatuximab-irfc + Pomalidomide + Dexamethasone (Isa-PD)
- Daratumumab + Pomalidomide + Dexamethasone (DPd)

*** Therapies that are administered at Centers of Excellence, including stem cell transplant or CAR T-cell therapy, are not included in pathways. Patients eligible for transplant or CAR T-cell therapy should be referred appropriately for evaluation.*

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Ovarian, Fallopian and Primary Peritoneal Cancer

Neoadjuvant Therapy

- Carboplatin + Paclitaxel**

Adjuvant or Primary Therapy

- Carboplatin + Paclitaxel**

Maintenance Therapy After Primary Therapy

- Olaparib (Germline/Somatic BRCA Mutation Only)
- Niraparib
- Rucaparib

Platinum – Sensitive Recurrent Disease

1st + Subsequent Lines of Therapy

- Carboplatin + Gemcitabine
- Carboplatin + Liposomal Doxorubicin
- Carboplatin + Paclitaxel

Maintenance Therapy After Platinum — Sensitive

- Olaparib
- Niraparib

Platinum — Resistant Recurrent Disease

1st and Subsequent Lines of Therapy

- Gemcitabine
- Liposomal Doxorubicin
- Liposomal Doxorubicin + Bevacizumab
- Paclitaxel (weekly)
- Paclitaxel (weekly) + Bevacizumab
- Tamoxifen
- Mirvetuximab soravtansine-gynx (FRα expressing tumors, ≥ 75% positive tumor cells)

***Only intravenous carboplatin + paclitaxel are pathway regimens.*

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Pancreatic Cancer (Adenocarcinoma)

Neoadjuvant (Resectable/Borderline Resectable)

- Fluorouracil/Leucovorin + Oxaliplatin + Irinotecan (FOLFIRINOX/mFOLFIRINOX)
- Gemcitabine + Albumin-Bound Paclitaxel (G-nP)

Adjuvant (Resectable)

- Fluorouracil/Leucovorin + Oxaliplatin + Irinotecan (mFOLFIRINOX)
- Gemcitabine + Capecitabine
- Gemcitabine

Locally Advanced/Metastatic

1st Line of Therapy

- Fluorouracil/Leucovorin + Oxaliplatin + Irinotecan (FOLFIRINOX/mFOLFIRINOX)
- Gemcitabine + Albumin-Bound Paclitaxel (G-nP)
- Gemcitabine

2nd and Subsequent Lines of Therapy

- Gemcitabine + Albumin-Bound Paclitaxel (G-nP)
- Gemcitabine
- Fluorouracil +/- Leucovorin
- Fluorouracil/Leucovorin + Oxaliplatin (OFF)
- Fluorouracil/Leucovorin + Oxaliplatin (FOLFOX)
- Fluorouracil/Leucovorin + Irinotecan (FOLFIRI)
- Fluorouracil/Leucovorin + Oxaliplatin + Irinotecan (FOLFIRINOX/mFOLFIRINOX)

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Prostate Cancer

Androgen Deprivation Therapy (ADT)

- Goserelin
- Leuprolide (HCPCS: J9217: Eligard, Lupron Depot)
- Triptorelin

Castration Sensitive

Neoadjuvant, Adjuvant in lieu of local therapy

- ADT

Recurrent or Metastatic

- ADT
- Abiraterone (Zytiga®), Prednisone + ADT
- Abiraterone (Zytiga®), Prednisone + Docetaxel + ADT

Castration Resistant

Recurrent or Metastatic

- Abiraterone (Zytiga®), Prednisone + ADT
- Docetaxel + ADT
- Olaparib + Abiraterone (Zytiga®), Prednisone + ADT (BRCA 1/2, no prior novel hormone)
- Cabazitaxel + ADT (after prior docetaxel therapy)
- Enzalutamide + ADT (after prior abiraterone therapy)

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Small Cell Lung Cancer

Limited Stage – Primary Therapy

- Carboplatin + Etoposide
- Cisplatin + Etoposide

Limited Stage – Maintenance after Primary Therapy

- Durvalumab

Extensive Stage – Primary Therapy

- Carboplatin + Etoposide + Atezolizumab
- Carboplatin + Etoposide + Durvalumab
- Cisplatin + Etoposide + Durvalumab
- Carboplatin + Etoposide
- Cisplatin + Etoposide

Extensive Stage – Maintenance after Primary Therapy

- Atezolizumab
- Durvalumab

Subsequent Therapy: Relapse $\leq$ 6 months

- Topotecan (IV)
- Paclitaxel
- Irinotecan

Subsequent Therapy: Relapse $>$ 6 months

- Carboplatin + Etoposide
- Cisplatin + Etoposide
- Topotecan (IV)
- Irinotecan

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Uterine Carcinoma (Endometrial)

Adjuvant

- Carboplatin + Paclitaxel
- Dostarlimab + Carboplatin + Paclitaxel (stage III-IV tumors)

Metastatic or Recurrent

1st Line of Therapy

- Carboplatin + Paclitaxel
- Carboplatin + Paclitaxel + Trastuzumab (for stage III/IV or recurrent HER2-positive uterine serous carcinoma only)
- Dostarlimab + Carboplatin + Paclitaxel (stage III-IV tumors)*
- Lenvatinib + Pembrolizumab (pMMR only, after prior platinum-based therapy including neoadjuvant and adjuvant)*

**For patients that have not received treatment with a checkpoint inhibitor.*

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Change control

Date	Change
The change log has been updated to reflect more recent changes.	
May 1, 2023	Update to existing pathways • Non-Small Cell Lung Cancer – Added Carboplatin/Cisplatin + Pemetrexed/Paclitaxel + Cemiplimab-rwlc (PD-L1: < 1%, 1 – 49%, and ≥ 50%) to Advanced/Metastatic – Nonsquamous (EGFR, ALK, RET WT) – 1st line of therapy – Added Carboplatin + Paclitaxel + Cemiplimab-rwlc (PD-L1: < 1%, 1 – 49%, and ≥ 50%) to Advanced/Metastatic – Squamous (EGFR, ALK, RET WT) – 1st line of therapy – Added Cemiplimab-rwlc ± Pemetrexed to Advanced/Metastatic – Nonsquamous (EGFR, ALK, RET WT) – Maintenance – Added Cemiplimab-rwlc to Advanced/Metastatic – Squamous (EGFR, ALK, RET WT) – Maintenance • Ovarian – Rucaparib – added to maintenance therapy following primary therapy (voted upon by committee 8/2022, NCCN went live with it V1.2023, December 22, 2022 – published in CGP tool on 5.12.2023)
June 1, 2023	Updates to existing pathway • Breast Cancer – Added Cisplatin/Carboplatin to Metastatic and Recurrent – Chemotherapy, HER2 negative, 1st line and subsequent lines of therapy, TNBC
June 23, 2023	Updates to existing pathways • Hepatobiliary split into two cancers, Hepatocellular and Biliary Tract Cancers
Aug. 1, 2023	Update to existing pathway • Melanoma – Removed Nivolumab (1mg/kg) + Ipilimumab (3mg/kg); kept Nivolumab (3mg/kg) + Ipilimumab (1mg/kg) as pathway

Sept. 1, 2023	Update to existing pathways • Ovarian Cancer – Carboplatin single-agent is removed from adjuvant/primary therapy as it has been removed from NCCN guidelines. • Uterine/Endometrial Cancer – Add dostarlimab + carboplatin/paclitaxel to primary/ adjuvant in dMMR/MSI-H patients. – Add dostarlimab + carboplatin/paclitaxel to first-line therapy for recurrent disease in dMMR/MSI-H patients and if prior ICI therapy was not received. – Add pembrolizumab + lenvatinib to first line recurrent therapy in pMMR patients for patients who had not received prior ICI therapy. – Pembrolizumab + lenvatinib is 2nd line in pMMR patients, added the variable, for patients who had not received prior ICI therapy. – Remove nivolumab, avelumab, and dostarlimab from 2nd line pathways in patients that dMMR/MSI-H and pembrolizumab in TMB-H (≥ 10 mutations/mega-base) or dMMR/MSI-H tumors. – Move the following therapies to 2nd line recurrent: Docetaxel (2B), doxorubicin, liposomal doxorubicin, and paclitaxel.
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Date	Changes
Oct. 1, 2023	Update to existing pathways Bladder Cancer – Add nivolumab to adjuvant therapy in muscle invasive bladder cancer in patients who are high-risk and PD-L1 $\geq$ 1%. – Carboplatin single-agent is removed from adjuvant/primary therapy as it has been removed from NCCN guidelines. Colorectal Cancer – Changed pembrolizumab to the only first-line agent in patients who are dMMR/MSI-H. – The following regimens were moved to second and subsequent lines of therapy in patients who are dMMR/MSI-H: – FOLFOX $\pm$ Bevacizumab – 5-FU + Leucovorin $\pm$ Bevacizumab – Capecitabine – FOLFIRI $\pm$ Bevacizumab – FOLFOX + Cetuximab* – FOLFIRI + Cetuximab* – FOLFOX + Panitumumab* – FOLFIRI + Panitumumab* – * KRAS/NRAS/BRAF WT and left-sided tumor only
Dec. 1, 2023	Update to existing pathways Bladder Cancer – Add BCG maintenance for NMIBC Esophageal, Esophagogastric Cancer – Addition of the following regimens in first-line recurrent or metastatic disease, HER2 negative or unknown disease – Capecitabine + Oxaliplatin + Pembrolizumab (CPS $\geq$ 10) – Fluorouracil $\pm$ Leucovorin + Cisplatin+ Pembrolizumab (CPS $\geq$ 10) – Fluorouracil $\pm$ Leucovorin + Oxaliplatin + Pembrolizumab (CPS $\geq$ 10) – Capecitabine + Cisplatin + Pembrolizumab (CPS $\geq$ 10) – Inclusion of “Unknown” to HER2 negative disease Multiple Myeloma – Removal bortezomib + thalidomide + dexamethasone (VTD) due to removal from NCCN Breast Cancer – The following regimens for HER2 positive moved to 4th line and subsequent due to NCCN updates: – Capecitabine + Lapatinib – Paclitaxel + Trastuzumab – Vinorelbine + Trastuzumab – Gemcitabine + Trastuzumab – Capecitabine + Trastuzumab

Date	Changes
March 1, 2024	Update to existing pathways • Prostate Cancer – Addition of the following regimen in castrate resistant metastatic recurrent prostate cancer with no prior novel hormone therapy, without and with prior docetaxel – Olaparib + Abiraterone (BRCA 1/2) • Non-Small Cell Lung Cancer – Addition of the following regimens in Neoadjuvant / Adjuvant therapy – Carboplatin + Pemetrexed +/- XRT – Nivolumab + Carboplatin or Cisplatin + Paclitaxel (Neoadjuvant only) – Nivolumab + Carboplatin or Cisplatin + Pemetrexed (Neoadjuvant only, Nonsquamous only) – Nivolumab + Carboplatin or Cisplatin + Gemcitabine (Neoadjuvant only, Squamous only) – Addition of the following regimens to Advanced/ Metastatic First-Line in “IO Ineligible” – Carboplatin or Cisplatin + Paclitaxel – Carboplatin or Cisplatin + Pemetrexed (Nonsquamous only) – Carboplatin + Cisplatin + Gemcitabine (Squamous only) – Addition of the following regimens to Advanced/ Metastatic Second-Line – Gemcitabine
April 1, 2024	Update to existing pathways • Chronic Myeloid Leukemia – Removal of dasatinib and nilotinib from first-line therapy – Addition of dasatinib, nilotinib, and imatinib to second-line and subsequent therapy – Removal of Omacetaxine from second-line and subsequent therapy – Limit the use of ponatinib to T315I mutation only – Addition of asciminib to third-line and subsequent • Gastric Cancer (reviewed 10/2023) – Addition of the following regimens in first-line recurrent or metastatic disease, HER2 negative or unknown disease – Capecitabine + Oxaliplatin + Pembrolizumab (CPS ≥ 10) – Fluorouracil ± Leucovorin + Oxaliplatin + Pembrolizumab (CPS ≥ 10) – Fluorouracil ± Leucovorin + Cisplatin+ Pembrolizumab (CPS ≥ 10) – Capecitabine + Cisplatin + Pembrolizumab (CPS ≥ 10) – Inclusion of “Unknown” to HER2 negative disease

Date	Changes
May 1, 2024	Update to existing pathways • Multiple Myeloma – Addition of the following regimen to Primary Therapy, Transplant Eligible – Daratumumab + Bortezomib + Lenalidomide + Dexamethasone (DVRd) – Addition of the following regimen to Relapsed/ Refractory, second relapse – Daratumumab + Pomalidomide + Dexamethasone (DPd) • Pancreatic Cancer – Addition of the following regimens to maintenance therapy for metastatic disease – Fluorouracil + Leucovorin – Capecitabine • Hepatocellular – Addition of the following regimen to first-line therapy – Durvalumab – Removal of the following regimens to first-line therapy – Lenvatinib – Sorafenib • Biliary Tract Cancers – Removal of the following regimen in first-line therapy – Durvalumab + Cisplatin + Gemcitabine
June 1, 2024	Update to existing pathways • Head and Neck – Addition of the following regimen to Non-Nasopharyngeal recurrent, metastatic, unresectable 1st line of therapy – Carboplatin + Paclitaxel + Pembrolizumab (CPS ≥ 1) – Addition of the following regimens to Nasopharyngeal recurrent, metastatic, unresectable 1st line of therapy – Cisplatin + Gemcitabine + Toripalimab – Cisplatin + Gemcitabine + Pembrolizumab – Cisplatin + Gemcitabine + Nivolumab • Follicular Lymphoma – Addition of the following regimen to first-line therapy – Rituximab (weekly for 4 doses) • Mantle Cell Lymphoma – Removal of the following regimen to first-line therapy (due to NCCN removal) – Alternating RCHOP/RDHAP (Rituximab, Cyclophosphamide, Doxorubicin, Vincristine, Prednisone)/(Rituximab, Dexamethasone, Cytarabine, Cisplatin) – Removal of the following regimen third-line and subsequent therapy (due to NCCN removal) – Lenalidomide • Marginal Zone Lymphoma – Removal of the following regimen to first-line therapy – Chlorambucil +/- Rituximab

Date	Changes
July 1, 2024	• Kidney Cancer – Addition of the following regimen to adjuvant therapy – Pembrolizumab – Addition of the following regimen to relapsed or metastatic 1st line of therapy – Nivolumab + Ipilimumab
August 1, 2024	• Breast Cancer – Addition of the following regimen to metastatic, HER 2 negative breast cancer – Fulvestrant + Letrozole – Addition of the following regimen to metastatic, HER 2 negative, hormone positive breast cancer in 3rd and subsequent lines of therapy – Sacituzumab Govitecan-hziy – Addition of the following regimen to metastatic, HER 2 positive, in 2nd line for patients with CNS involvement – Tucatinib + Trastuzumab + Capecitabine – Addition of the following regimen to metastatic, HER 2 positive, in 3rd and subsequent lines of therapy – Tucatinib + Trastuzumab + Capecitabine – Removal of the following regimen to metastatic, HER 2 positive, in 4th and subsequent lines of therapy – Lapatinib + Capecitabine
September 1, 2024	• Uterine / Endometrial Cancer – No changes • Ovarian Cancer – Addition of the following regimen to recurrent disease platinum resistant or platinum-refractory – Mirvetuximab soravtansine-gynx (FRα expressing tumors, ≥75% positive tumor cells) • Bladder Cancer – Changed enfortumab vedotin to locally advanced or metastatic 2nd line and subsequent from 3rd line and subsequent – Addition of the following regimen to locally advanced or metastatic 2nd line and subsequent – Erdaftinib in FGFR 3 mutations
November 1, 2024	• Gastric, Esophageal and EGJ Cancer – Addition of the following regimen to 1st line recurrent, metastatic, unresectable locally advanced disease – Capecitabine + Cisplatin + Trastuzumab + Pembrolizumab (CPS ≥ 1) – Capecitabine + Oxaliplatin + Trastuzumab + Pembrolizumab (CPS ≥ 1) – Fluorouracil +/- Leucovorin + Oxaliplatin + Trastuzumab + Pembrolizumab (CPS ≥ 1) – Fluorouracil +/- Leucovorin + Cisplatin + Trastuzumab + Pembrolizumab (CPS ≥ 1)

Date	Changes
November 1, 2024 continued	• Colorectal Cancer – In metastatic or unresectable/ medically inoperable in KRAS/NRAS/BRAF MUT/UNK/WT change the pathways from 1st and 2nd lines of therapy to 1st and subsequent lines of therapy. – In metastatic or unresectable/ medically inoperable in KRAS/NRAS/BRAF/WT change the pathways to allow for EGFR-I to used in 2nd line regardless of tumor location and this will follow NCCN guidelines. – Addition of the following regimens in metastatic or unresectable/ medically inoperable in KRAS/NRAS/BRAF MUT/UNK/WT in pMMR/MSI-S and dMMR/MSI-H in 2nd and subsequent lines of therapy – Encorafenib + Cetuximab (BRAF V600E mutation positive) – Encorafenib + Panitumumab (BRAF V600E mutation positive) – Addition of the following regimens in metastatic or unresectable/ medically inoperable in KRAS/NRAS/BRAF MUT/UNK/WT in pMMR/MSI-S and dMMR/MSI-H in 3rd and subsequent lines of therapy – Trifluridine/Tipiracil + Bevacizumab
December 1, 2024	• Breast Cancer – Addition of the following regimen in triple negative breast cancer (TNBC) in neoadjuvant/ adjuvant therapy – Neoadjuvant Pembrolizumab + Carboplatin + Paclitaxel followed by Pembrolizumab + Cyclophosphamide + Doxorubicin or Epirubicin, followed by adjuvant pembrolizumab (per NCCN guidelines) • Small Cell Lung Cancer – Addition of the following regimen in limited stage small cell lung cancer consolidation / maintenance – Durvalumab
February 1, 2025	• Non-Small Cell Lung cancer – Addition of the following regimen in completely resected patients – Alectinib (stage II-IIIA or stage IIIB (T3, N2) NSCLC and positive for ALK rearrangement) – Addition of language to include “either one, two or all of the following” to several regimens in which there is more than one therapy (see above)
March 1, 2025	• Multiple Myeloma – 1st and 2nd relapse / refractory regimens were merged allowing 4 additional regimens in 1st relapse / refractory – Bortezomib, Pomalidomide, Dexamethasone (VPd) – Carfilzomib, Lenalidomide, Dexamethasone (KRd) – Elotuzumab, Pomalidomide, Dexamethasone (EPd) – Daratumumab, Pomalidomide, Dexamethasone (DPd) – Isatuximab-irfc, Pomalidomide, Dexamethasone (Isa-Pd)

Date	Changes
April 1, 2025	• Chronic Myeloid Leukemia – Imatinib removed from 2nd line in the NCCN guidelines – Ponatinib (T315I) removed from 2nd and subsequent lines of therapy – Asciminib added to pathways in 2nd and subsequent lines of therapy for T315I mutation • Chronic Lymphocytic Leukemia – no changes
May 1, 2025	• Prostate Cancer – no changes • Pancreatic Cancer – Maintenance pathways removed • Biliary Tract Cancer – Addition of the following regimen to First-Line Therapy – Durvalumab + Cisplatin + Gemcitabine – Pembrolizumab + Cisplatin + Gemcitabine • Hepatocellular Cancer – Removal of second and subsequent pathways
June 1, 2025	• Hodgkin Lymphoma – Addition of the following regimen to First-Line Therapy – Nivolumab + Doxorubicin + Vinblastine + Dacarbazine in stage III-IV • Diffuse Large B-Cell Lymphoma – Removal of second and subsequent pathways • Follicular Lymphoma - no changes • Mantle Cell Lymphoma - no changes • Marginal Zone Lymphoma - no changes
July 1, 2025	• Kidney Cancer – Removal of second and subsequent pathways • Head and Neck Cancer – Addition of the following regimens to Non-Nasopharyngeal: Recurrent / Metastatic / Unresectable: First (1st) Line of Therapy in patients with a CPS < 1 – Carboplatin, Fluorouracil, Pembrolizumab – Cisplatin, Fluorouracil, Pembrolizumab – Carboplatin, Paclitaxel, Pembrolizumab

September 1, 2025	• Ovarian – no changes • Melanoma – Modified the existing metastatic / unresectable regimen, Nivolumab + Ipilimumab to be dose agnostic • Uterine / Endometrial – Addition of the following regimen to primary or adjuvant therapy and first-line therapy for recurrent disease – Carboplatin + paclitaxel + dostarlimab-gxly (stage III-IV tumors) for pMMR/ MSI-S – Removal of second-line and subsequent pathways • Bladder – Addition of the following regimen to locally advanced or metastatic first-line of therapy – Pembrolizumab and enfortumab vedotin-ejfv
Addition pending NCCN addition	• Prostate Cancer (1/2024) – Addition of the following regimen in castrate resistant metastatic recurrent prostate cancer with no prior novel hormone therapy, without and with prior docetaxel – Olaparib + Abiraterone + ADT (HRRm) • Non-Small Cell Lung Cancer (1/2024) – Addition of the following regimen to Advanced/ Metastatic First-Line – Atezolizumab + Carboplatin or Cisplatin + Paclitaxel (Nonsquamous only) – Addition of the following regimen to Advanced/ Metastatic Maintenance (when above is adopted) – Atezolizumab (Nonsquamous) • Melanoma (6/2024) – Addition of the following regimen in stage III melanoma, neoadjuvant – Nivolumab + Ipilimumab x 2 cycles