



MVP Health Care Medicaid Medical Policy

Perjeta (pertuzumab)- Medicaid

Type of Policy: Medical

Prior Approval Date: 12/03/2019

Approval Date: 07/01/2022

Effective Date: 07/01/2022

Related Policies: Experimental or Investigational Procedures Experimental or Investigational Procedures, Behavioral Health Services, Drugs and Treatments, Off-Label use of FDA Approved Drugs, and Clinical Trials Policy

Codes covered under the medical benefit

J9306 Injection, pertuzumab, 1 mg

Administration Codes

96413 Chemotherapy administration, intravenous infusion technique; up to 1 hour, single or initial substance/drug

Overview

Perjeta (pertuzumab) is a humanized recombinant monoclonal antibody that blocks ligand dependent heterodimerization of human epidermal growth factor receptor-2 (HER2) as well as other epidermal growth factor receptors which results in the inhibition of intracellular signaling pathways leading to cell growth arrest and apoptosis. It is indicated for first-line treatment of HER2 positive metastatic breast cancer in combination with trastuzumab and docetaxel.

Indications/Criteria

On label use of Perjeta is covered under the member's medical benefit and is subject to retro-review only. Off label use is subject to prior authorization and must meet MVP's clinical coverage criteria for Experimental or Investigational Procedures Experimental or Investigational Procedures, Behavioral Health Services, Drugs and Treatments, Off-Label use of FDA Approved Drugs, and Clinical Trials Policy.

References

1. Perjeta (pertuzumab) injection, for intravenous use [prescribing information]. San Francisco, CA; Genentech, INC. June 2012.