Medical Policy:

Ziihera (zanidatamab-hrii), intravenous infusion

POLICY NUMBER	LAST REVIEW	ORIGIN DATE
MG.MM.PH.430	February 6, 2025	February 6, 2025

Definitions

ZIIHERA is indicated for the treatment of adults with previously treated, unresectable or metastatic HER2-positive (IHC 3+) biliary tract cancer (BTC), as detected by an FDA-approved test.

Length of Authorization

Coverage will be provided for 6 months and may be renewed.

Dosing Limits [Medical Benefit]

Max Units (per dose and over time) [HCPCS Unit]:

- 2400 mg every 21 days

Guideline

I. INITIAL CRITERIA

1. **Biliary Tract Cancers (Gallbladder Cancer or Intra-/Extra-Hepatic Cholangiocarcinoma)**
    - A. Patient is at least 18 years of age; **AND**
    - B. Left ventricular ejection fraction (LVEF) is within normal limits prior to initiating therapy and will be assessed at regular intervals during treatment; **AND**

C. Patient doesn't have untreated or symptomatic central nervous system (CNS) metastases; **AND**
D. Females of childbearing potential must have a negative pregnancy test prior to the first dose of therapy and will use an effective contraceptive method while receiving therapy and for four months following the last dose of therapy; **AND**
E. Patient has human epidermal growth factor receptor 2 (HER2)-positive (IHC3+) disease as determined by an FDA-approved or CLIA-compliant test; **AND**
F. Used as a single agent; **AND**
G. Used for unresectable or metastatic disease; **AND**
H. Used as subsequent treatment after at least one prior line of therapy containing a gemcitabine containing regimen.

II. RENEWAL CRITERIA

1. **Biliary Tract Cancers (Gallbladder Cancer or Intra-/Extra-Hepatic Cholangiocarcinoma)**

Coverage may be renewed based upon the following criteria:

A. Patient continues to meet the universal and other indication-specific relevant criteria such as concomitant therapy requirements (not including prerequisite therapy), performance status, etc. identified in Initial Criteria; **AND**
B. Disease response with treatment as defined by stabilization of disease or decrease in size of tumor or tumor spread; **AND**
C. Absence of unacceptable toxicity from the drug. Examples of unacceptable toxicity include: left ventricular dysfunction (including symptomatic congestive heart failure), severe infusion related reactions, severe diarrhea, etc.; **AND**
D. Left ventricular ejection fraction (LVEF) within the previous 3 months as follows:
   a. LVEF has an absolute decrease of < 16% from baseline; **OR**
   b. LVEF is > 50% and absolute decrease is < 10% from baseline

Applicable Procedure Codes

Code	Description
J3590	Not otherwise classified, antineoplastic drugs

Applicable NDCs

Code	Description
68727-0950-xx	Ziihera 300 mg lyophilized powder in a single-dose vial

ICD-10 Diagnoses

Code	Description
C22.1	Intrahepatic bile duct carcinoma
C23	Malignant neoplasm of gallbladder
C24.0	Malignant neoplasm of extrahepatic bile duct
C24.8	Malignant neoplasm of overlapping sites of biliary tract
C24.9	Malignant neoplasm of biliary tract, unspecified

Revision History

Company(ies)	DATE	REVISION
EmblemHealth & ConnectiCare	02/06/2025	New Policy

References

1. Ziihera® intravenous infusion [prescribing information]. Palo Alto, CA: Jazz; November 2024.