CADTH | pCODR PAN-CANADIAN ONCOLOGY DRUG REVIEW

PROVINCIAL FUNDING SUMMARY

Atezolizumab (Tecentriq) for Non-Small Cell Lung Cancer (pCODR 10115)

pERC Recommendation: Recommends with conditions

For further details, please see pERC Final Recommendation

Notification to Implement Issued by pCODR: July 6, 2018

This information is current as of October 1, 2020.

Note: Funding criteria as listed on the decision date. Please refer to the provincial drug programs for the most recent funding criteria and program eligibility.

PROVINCE	FUNDING STATUS	FUNDING DATE	FUNDING CRITERIA
BC	Funded	Nov 1, 2019	Advanced non-small cell lung cancer, irrespective of histology ▪ Second- or subsequent-line therapy for disease progression on or after prior platinum-based chemotherapy ▪ Good performance status ▪ Adequate hepatic and renal function ▪ Access to a treatment centre with expertise to manage immune-mediated adverse reactions of atezolizumab ▪ BC Cancer Compassionate Access Program (CAP) approval must be obtained ▪ Patients are eligible to receive one of atezolizumab, nivolumab or pembrolizumab, but not sequential use of these agents.
AB	Funded	Oct 7, 2019	For the treatment of patients with locally advanced or metastatic non-small cell lung cancer (NSCLC) and disease progression on or after cytotoxic chemotherapy. Patients with genomic tumor aberrations (EGFR or ALK) should first be treated with targeted agents followed by cytotoxic chemotherapy prior to atezolizumab. Patients previously treated with durvalumab in the adjuvant setting who have relapsed after the completion of adjuvant therapy must have had at least six month interval off durvalumab with no disease recurrence while on durvalumab Treatment should continue until confirmed disease progression. Cannot have received either pembrolizumab or nivolumab.

PROVINCE	FUNDING STATUS	FUNDING DATE	FUNDING CRITERIA
SK	Funded	Feb 11, 2019	Treatment of patients with locally advanced (not amenable to curative therapy) or metastatic non-small cell lung cancer and who have disease progression on or after cytotoxic chemotherapy. Patients with genomic tumor driver aberrations (e.g., epidermal growth factor receptor (EGFR) or anaplastic lymphoma kinase (ALK)) should first be treated with targeted agents followed by cytotoxic chemotherapy prior to receiving Atezolizumab. Treatment with Atezolizumab should be discontinued upon loss of clinical benefit or unacceptable toxicity.
MB	Funded	Feb 13, 2019	For the treatment of patients with locally advanced or metastatic non-small cell lung cancer (NSCLC) and who have disease progression on or after cytotoxic chemotherapy. Patients with genomic tumour driver aberrations {e.g. epidermal growth factor receptor (EGFR) or anaplastic lymphoma kinase (ALK) should be treated with targeted agents followed by cytotoxic chemotherapy prior to receiving atezolizumab} Treatment should continue until disease progression or unacceptable toxicity.
ON	Funded	Dec 6, 2019	• Atezolizumab is used for the treatment of patients who have locally advanced or metastatic non-small cell lung cancer whose disease has progressed on or after cytotoxic chemotherapy. • Patients with EGFR or ALK mutations should be treated with targeted agents followed by cytotoxic chemotherapy prior to receiving atezolizumab. • Treatment with atezolizumab should be continued until unacceptable toxicity or confirmed disease progression.
NS	Under provincial consideration		
NB	Funded	Oct 30, 2019	For the treatment of patients with locally advanced (not amenable to curative therapy) or metastatic non-small cell lung cancer with disease progression on or after cytotoxic chemotherapy. Patients with genomic tumor driver aberrations (e.g., epidermal growth factor receptor (EGFR) mutation or anaplastic lymphoma kinase (ALK)) should first be treated with targeted agents followed by cytotoxic chemotherapy prior to receiving atezolizumab. Treatment should be discontinued upon disease progression or unacceptable toxicity.

PROVINCE	FUNDING STATUS	FUNDING DATE	FUNDING CRITERIA
NL	Under provincial consideration		
PEI	Under provincial consideration		

Under provincial consideration means that the province is reviewing pCODR's recommendation. This may include the province working with the drug manufacturer to reach an agreement for a drug product that both parties can accept, in particular in cases where the pCODR Expert Review Committee has recommended that the drug be funded only on the condition of cost-effectiveness being improved to an acceptable level. This may occur before or after the pan-Canadian Pharmaceutical Alliance negotiations. Please contact the specific provincial drug program and/or cancer agency in your province for information about the status of a given drug product.