Former Policy #	New Policy #	Policy Name	Type of Change	Brief Description of Policy Change	Reason for Changes
NEW	ECG 3157	Lynozyfic (linvoseltamab-gcpt)	Positive	On July 2, 2025, the Food and Drug Administration granted accelerated approval to linvoseltamab-gcpt (Lynozyfic, Regeneron Pharmaceuticals, Inc.), a bispecific B-cell maturation antigen (BCMA)-directed CD3 T-cell engager, for adults with relapsed or refractory multiple myeloma who have received at least four prior lines of therapy, including a proteasome inhibitor (PI), an immunomodulatory agent (IMiD), and an anti-CD38 monoclonal antibody.	New FDA Drug/Indication
NEW	ECG 3158	Zegfrovy (sunvozertinib)	Positive	On July 2, 2025, the Food and Drug Administration granted accelerated approval to sunvozertinib (Zegfrovy, Dizal (Jiangsu) Pharmaceutical Co., Ltd.) for adult patients with locally advanced or metastatic non-small cell lung cancer (NSCLC) with epidermal growth factor receptor (EGFR) exon 20 insertion mutations, as detected by an FDA-approved test, whose disease has progressed on or after platinum-based chemotherapy.	New FDA Drug/Indication
UM ONC_1070	ECG 3162	Valstar (Valrubicin)	No clinical change	1) Converted to new Evolent policy template 2) Updated indication section 3) Updated references	Annual Review
UM ONC_1205	ECG 3164	Havalen (eribulin)	No clinical change	1) Converted to new Evolent policy template 2) Updated indication section 3) Updated references	Annual Review
UM ONC_1215	ECG 3165	Treanda/Bendeka/Belrapzo (bendamustine)	No clinical change	1) Converted to new Evolent policy template 2) Updated indication section 3) Updated references	Annual Review
UM ONC_1325	ECG 3166	Mylotarg (gemtuzumab ozogamicin)	No clinical change	1) Converted to new Evolent policy template 2) Updated indication section 3) Updated references	Annual Review
UM ONC_1341	ECG 3167	Vizimpro (dacomitinib)	No clinical change	1) Converted to new Evolent policy template 2) Updated indication section 3) Updated references	Annual Review
UM ONC_1406	ECG 3168	Tabrecta (capmatinib)	No clinical change	1) Converted to new Evolent policy template 2) Updated indication section 3) Updated maximum dosage form quantities in exclusion criteria 4) Updated references	Annual Review
UM ONC_1473	ECG 3169	Krazati (adagrasib)	No clinical change	1) Converted to new Evolent policy template 2) Updated colorectal cancer indication section to include use with panitumumab in initial and subsequent line metastatic setting as per NCCN 3) Updated references	Annual Review
UM ONC_1480	ECG 3170	Columvi (glofitamab-gxbm)	No clinical change	1) Converted to new Evolent policy template 2) Updated indication section 3) Updated references	Annual Review
UM ONC_1490	ECG 3172	Augtyro (repotrectinib)	No clinical change	1) Converted to new Evolent policy template 2) Updated indication section 3) Updated maximum dosage form quantities in exclusion criteria 4) Updated exclusion criteria 5) Updated references	Annual Review
UM ONC_1505	ECG 3173	Piasky (crovalimab-akkz)	No clinical change	1) Converted to new Evolent policy template 2) Updated references	Annual Review
UM ONC_1506		Rytelo (imetelstat)	No clinical change	1) Converted to new Evolent policy template 2) Updated references	Annual Review
ECG 3039	ECG 3039	Generic Drugs	Positive	On June 25, 2024, the U.S. Food and Drug Administration (FDA) approved Shorla Oncology's Tepylute (thiotepa) injection for the treatment of adenocarcinoma of the breast or ovary. Tepylute was approved via the FDA's 505(b)(2)New Drug Application (NDA) pathway referencing generic thiotepa in a ready-to-dilute formulation. Added "Tepylute (thiotepa)" to the list of drugs in Attachment A	New FDA Drug/Indication
UM ONC_1263	ECG 3159	Keytruda (pembrolizumab)	Positive	On June 12, 2025, the Food and Drug Administration approved pembrolizumab (Keytruda, Merck) for adults with resectable locally advanced head and neck squamous cell carcinoma (HNSCC) whose tumors express PD-L1 [Combined Positive Score (CPS)≥1] as determined by an FDA-approved test, as a single agent as neoadjuvant treatment, continued as adjuvant treatment in combination with radiotherapy (RT) with or without cisplatin after surgery, and then as a single agent. 1) Converted to new Evolent policy template 2) Updated Head and Neck indication section. 3) Updated indication section 4) Updated references	New FDA Drug/Indication
ECG 3122	ECG 3122	Monjuvi (tafasitamab-cxix)	Positive	On June 18, 2025, the Food and Drug Administration approved tafasitamab-cxix (Monjuvi, Incyte Corporation) with lenalidomide and rituximab for adults with relapsed or refractory follicular lymphoma (FL). 1) Updated indication section 2) Updated references	New FDA Drug/Indication
ECG 3008	ECG 3008	Datroway (datopotamab deruxtecan-dlnk)	Positive	On June 23, 2025, the Food and Drug Administration granted accelerated approval to datopotamab deruxtecan-dlnk (Datroway, Daiichi Sankyo, Inc.) for adults with locally advanced or metastatic epidermal growth factor receptor (EGFR)-mutated non-small cell lung cancer (NSCLC) who have received prior EGFR-directed therapy and platinum-based chemotherapy. 1) Added new NSCLC indication 2) Added note under Breast Cancer indication section to highlight low-value regimen for adult patients with unresectable or metastatic, hormone receptor (HR)-positive, human epidermal growth factor receptor 2 (HER2)-negative (IHC 0, IHC1+ or IHC2+/ISH-) breast cancer who have received prior endocrine-based therapy and chemotherapy for unresectable or metastatic disease. Datopotamab showed inferior efficacy and higher cost compared to alternatives. 3) Updated HCPC code 4) Updated references	New FDA Drug/Indication
UM ONC_1280	ECG 3160	Darzalex and Darzalex Faspro (daratumumab)	Positive	1) Converted to new Evolent policy template 2) Added combination regimen with cyclophosphamide, bortezomib, and dexamethasone to initial therapy in newly diagnosed multiple myeloma (NCCN category 2A) 3) Updated references	Other
UM ONC_1392	ECG 3161	Reblozyl (luspatercept-aamt)	Positive	1) Converted to new Evolent policy template 2) Changed RBC transfusion dependence in MDS indication from "2-6 PRBC units/8 weeks" to "2 units a month for 3 consecutive months"	Other
ECG 3132	ECG 3132	Emrelis (telisotuzumab vedotin-tllv)	Positive	Added to indication section and exclusion criteria that c-Met protein overexpression testing must be done using the VENTANA MET (SP44) RxDx Assay	Other
ECG 3154	ECG 3154	Bevacizumab Products	Positive	Removed PD-L1 requirement when used in combination with paclitaxel + cisplatin/carboplatin or paclitaxel + topotecan for initial line, metastatic/recurrent/unresectable cervical cancer to match compendia	Other