Former Policy #	New Policy #	Policy Name	Type of Change	Brief Description of Policy Change	Reason for Changes
NEW	ECG 3231	Blenrep (belantamab mafodotin-blmf)	Positive	On October 23, 2025, the Food and Drug Administration approved belantamab mafodotin-blmf (Blenrep, GlaxoSmithKline), a B-cell maturation antigen (BCMA)-directed antibody and microtubule inhibitor conjugate, with bortezomib and dexamethasone for adults with relapsed or refractory multiple myeloma who have received at least two prior lines of therapy, including a proteasome inhibitor and an immunomodulatory agent.	New FDA Drug/Indication
NEW	ECG 3232	Komzifti (ziftomenib)	Positive	On November 13, 2025, the Food and Drug Administration approved ziftomenib (Komzifti, Kura Oncology, Inc.), a menin inhibitor, for adults with relapsed or refractory acute myeloid leukemia (AML) with a susceptible nucleophosmin 1 (NPM1) mutation who have no satisfactory alternative treatment options.	New FDA Drug/Indication
NEW	ECG 3233	Hyrnuo (sevabertinib)	Positive	On November 19, 2025, the Food and Drug Administration granted accelerated approval to sevabertinib (Hyrnuo, Bayer HealthCare Pharmaceuticals Inc.), a kinase inhibitor, for adults with locally advanced or metastatic, non-squamous non-small cell lung cancer (NSCLC) whose tumors have HER2 (ERBB2) tyrosine kinase domain (TKD) activating mutations, as detected by an FDA-approved test, and who have received a prior systemic therapy.	New FDA Drug/Indication
UM ONC_1218	ECG 3235	Provenge (sipuleucel-T)	No clinical change	1) Converted to new Evolent policy template 2) Updated references	Annual Review
UM ONC_1276	ECG 3236	Onivyde (irinotecan liposome injection)	No clinical change	1) Converted to new Evolent policy template 2) Updated references	Annual Review
UM ONC_1284	ECG 3237	Ninlaro (ixazomib)	No clinical change	1) Converted to new Evolent policy template 2) Updated references	Annual Review
UM ONC_1301	ECG 3238	Rubraca (rucaparib)	No clinical change	1) Converted to new Evolent policy template 2) Updated exclusion criteria 3) Updated references	Annual Review
UM ONC_1326	ECG 3239	Vyxeos (daunorubicin and cytarabine liposomal)	No clinical change	1) Converted to new Evolent policy template 2) Updated exclusion criteria 3) Updated references	Annual Review
UM ONC_1340	ECG 3240	Tibsovo (ivosidenib)	No clinical change	1) Converted to new Evolent policy template 2) Updated references	Annual Review
UM ONC_1455	ECG 3242	Scemblix (asciminib)	No clinical change	1) Converted to new Evolent policy template 2) Updated maximum dosage form quantities in exclusion criteria 3) Updated references	Annual Review
UM ONC_1470	ECG 3243	Tecvayli (teclistamab-cqyv)	No clinical change	1) Converted to new Evolent policy template 2) Updated references	Annual Review
UM ONC_1476	ECG 3244	Jaypirca (pirtobrutinib)	No clinical change	1) Converted to new Evolent policy template 2) Updated references	Annual Review
UM ONC_1489	ECG 3245	Adzynma (ADAMTS13, recombinant-krhn)	No clinical change	1) Converted to new Evolent policy template 2) Updated references	Annual Review
UM ONC_1491	ECG 3246	Fruzaqla (fruquintinib)	No clinical change	1) Converted to new Evolent policy template 2) Updated references	Annual Review
UM ONC_1492	ECG 3247	Loqtorzi (toripalimab-tpzi)	No clinical change	1) Converted to new Evolent policy template 2) Updated references	Annual Review
UM ONC_1493	ECG 3248	Ogsiveo (nirogacestat)	No clinical change	1) Converted to new Evolent policy template 2) Updated references	Annual Review

UM ONC_1494	ECG 3249	Truqap (capivasertib)	No clinical change	1) Converted to new Evolent policy template 2) Updated references	Annual Review
UM ONC_1509	ECG 3250	Lazcluze (lazertinib)	No clinical change	1) Converted to new Evolent policy template 2) Added maximum dosage form quantities to exclusion criteria 3) Updated references	Annual Review
UM ONC_1512	ECG 3251	Vyloy (zolbetuximab-clzb)	No clinical change	1) Converted to new Evolent policy template 2) Updated references	Annual Review
UM ONC_1513	ECG 3252	Aucatzyl (obecabtagene autoleucel)	No clinical change	1) Converted to new Evolent policy template 2) Updated references	Annual Review
UM ONC_1514	ECG 3234	Revuforj (revumenib)	Positive	On October 24, 2025, the Food and Drug Administration approved revumenib (Revuforj, Syndax Pharmaceuticals, Inc.), a menin inhibitor, for relapsed or refractory acute myeloid leukemia with a susceptible nucleophosmin 1 (*NPM1*) mutation in adult and pediatric patients 1 year and older who have no satisfactory alternative treatment options.	New FDA Drug/Indication
ECG 3074	ECG 3074	Bone Modifying Agents (Pamidronate, Zoledronic Acid, Denosumab Products)	Positive	In October 2025, the Food and Drug Administration approved Jubereq (denosumab-desu), a biosimilar to Xgeva (denosumab), and Osvyrti (denosumab-desu), a biosimilar to Prolia (denosumab). 1) Added new biosimilars to policy 2) Updated HCPC codes 3) Updated references	New biosimilars
ECG 3160	ECG 3160	Darzalex and Darzalex Faspro (daratumumab IV/SC)	Positive	On November 6, 2025, the Food and Drug Administration approved daratumumab and hyaluronidase-fihj (Darzalex Faspro, Janssen Biotech, Inc.) for adults with high-risk smoldering multiple myeloma (SMM). 1) Added new indication 2) Updated references	New FDA Drug/Indication
ECG 3073	ECG 3073	Trastuzumab Products, Pertuzumab, and Phesgo	Positive	On November 13, 2025, the Food and Drug Administration approved Poherdy (pertuzumab-dpzb, Shanghai Henlius Biologics Co. Ltd.) as an interchangeable biosimilar to Perjeta (pertuzumab, Genentech Inc.). This is the first approval of a biosimilar for Perjeta. 1) Added new biosimilar to all relevant sections 2) Added new HCPC code 3) Updated references	New biosimilars
ECG 3150	ECG 3150	Epkinly (epcoritamab-bysp)	Positive	On November 18, 2025, the Food and Drug Administration approved epcoritamab-bysp (Epkinly, Genmab US, Inc.) with lenalidomide and rituximab for relapsed or refractory follicular lymphoma (FL). The FDA also granted traditional approval to epcoritamab-bysp as monotherapy for relapsed or refractory FL after two or more lines of systemic therapy (epcoritamab-bysp was granted accelerated approval for this indication in 2024). 1) Added new follicular lymphoma indication 2) Added new R/R DLBCL indication in combination with gemcitabine and oxaliplatin after 2 lines of therapy in members who are not candidates for CAR-T or transplant 3) Updated exclusion criteria 4) Updated references	New FDA Drug/Indication
ECG 3146	ECG 3146	Koselugo (selumetinib)	Positive	On November 19, 2025, the Food and Drug Administration approved selumetinib (KOSELUGO, AstraZeneca Pharmaceuticals LP) for adults with neurofibromatosis type 1 (NF1) who have symptomatic, inoperable plexiform neurofibromas (PN). FDA previously approved selumetinib capsules and granules for pediatric patients 1 year of age and older for this indication. 1) Indication added to policy in July 2024 2) Updated references	New FDA Drug/Indication

ECG 3151	ECG 3151	Imdelltra (tarlatamab-dlle)	Positive	On November 19, 2025, the Food and Drug Administration granted traditional approval to tarlatamab-dlle (Imdelltra, Amgen Inc.) for adults with extensive stage small cell lung cancer (ES-SCLC) with disease progression on or after platinum-based chemotherapy. Tarlatamab-dlle received accelerated approval for this indication in 2024. 1) Indication added to policy in July 2024 2) Updated references	New FDA Drug/Indication
ECG 3105	ECG 3105	Imfinzi (durvalumab)	Positive	On November 25, 2025, the Food and Drug Administration approved durvalumab (Imfinzi, AstraZeneca) with fluorouracil, leucovorin, oxaliplatin, and docetaxel (FLOT) chemotherapy as neoadjuvant and adjuvant treatment, followed by single agent durvalumab, for adults with resectable gastric or gastroesophageal junction adenocarcinoma (GC/GEJC). 1) Added new indication to policy in October 2025 2) Added the following verbiage to the gastric/esophageal/esophagogastric junction cancer section: “Neoadjuvant therapy is required to proceed with adjuvant therapy	New FDA Drug/Indication
ECG 3106	ECG 3106	Myeloid Growth Factors (MGFs)	Positive	Updated verbiage in “MGF in Members Receiving Concurrent Chemoradiation” section	Other
ECG 3039	ECG 3039	Generic Drugs	Positive	Added “Droxia (hydroxyurea)”, “Xromi (hydroxyurea)”, and “Imkeldi (imatinib)” to the list of drugs in Attachment A	Other