Breast Cancer Pathways:
Endocrine Therapy for Advanced/Metastatic Disease

<table>
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<th>Patient Name:</th>
<th>Date of Birth:</th>
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Member Number: ____________________________

Treatment Start Date: ____________________

Pathology: ____________________________

Stage: ____________________________

ECOG Performance Status: ______  ICD-10 Code: ____________

**Pathway**

**Biomarkers/Characteristics:** (select all that apply)

- Estrogen Receptor (ER): _Negative_  _Positive_
- Progesterone Receptor (PR): _Negative_  _Positive_
- HER2 status by FISH/CISH: _Negative_  _Positive_  _Equivocal_
  or by IHC: _0_  _1+_  _2+_  _3+_  

**Advanced/Metastatic Disease | Hormone Receptor Positive | First Line of Therapy (1st Line)**

- _Anastrozole (Arimidex)*
- _Anastrozole (Arimidex) and palbociclib (Ibrance)*
- _Anastrozole (Arimidex) and ribociclib (Kisqali)*
- _Fulvestrant (Faslodex)* high dose
- _Fulvestrant (Faslodex) and ribociclib (Kisqali)*
- _Letrozole (Femara)*
- _Letrozole (Femara) and palbociclib (Ibrance)*
- _Letrozole (Femara) and ribociclib (Kisqali)*
- _Tamoxifen†_

**Advanced/Metastatic Disease | Hormone Receptor Positive | Second and Subsequent Lines of Therapy (2nd Line+)**

- _Anastrozole (Arimidex)*
- _Exemestane (Aromasin)*
- _Fulvestrant (Faslodex) high dose*
- _Fulvestrant (Faslodex) and palbociclib (Ibrance)‡*
- _Fulvestrant (Faslodex) and ribociclib (Kisqali)‡*
- _Letrozole (Femara)*
- _Tamoxifen†_

**Advanced/Metastatic Disease | Hormone Receptor Positive | HER2 Positive | First and Subsequent Lines of Therapy (1st Line+)**

- _Anastrozole (Arimidex) and trastuzumab*
- _Letrozole (Femara) and trastuzumab*

**Advanced/Metastatic Disease | Hormone Receptor Positive | HER2 Negative | PIK3CA Mutated | Second and Subsequent Line (2nd Line+)**

- _Fulvestrant (Faslodex) and alpelisib (PIQRAY)§_

* With ovarian suppression for premenopausal individuals. Ovarian suppression utilizes LHRH agonists given as monthly injections. 3-month depot dosing does not reliably suppress estrogen levels.

† Tamoxifen is considered pathway for premenopausal individuals with or without ovarian suppression

‡ Palbociclib and ribociclib regimens are not considered pathway when continued in the second line setting if the patient has received an available CDK4/6 inhibitor regimen in the first line setting

§ After progression on prior therapy with a CDK 4/6 inhibitor

**Note:** Pathways are independent of specific health plan medical policy coverage criteria. Health plan medical policy/clinical guidelines should be consulted to determine whether proposed services will be covered. Biosimilars or alternate formulations (along with the reference products) are considered on pathway unless otherwise specified by health plan formularies, medical policies, or preferred product rules.