

Hepatocellular Carcinoma Pathways

Patient Name: _____ Date of Birth: _____

Member Number: _____ Treatment Start Date: _____

Pathology: _____ Stage: _____

Line of Therapy: __1st Line __2nd Line __3rd Line __3rd Line+ __Maint ECOG Performance Status: _____ ICD-10 Code: _____

Biomarkers/Characteristics: (select all that apply)

Microsatellite Instability: __dMMR/MSI-H __MSI-L __Not Reported NTRK Fusion: __Negative __Positive __Not Reported

NTRK Fusion: __Negative __Positive __Not Reported __Unknown

Unresectable and Metastatic Disease | First Line of Therapy (1st Line)

Atezolizumab and bevacizumab

Sorafenib

Unresectable and Metastatic Disease | Second Line of Therapy (2nd Line)

Cabozantinib

Regorafenib

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 of reference products listed are considered "on pathway." However, reimbursement for biosimilar products may be impacted by health plan specific formularies, medical policy and preferred product rules.

