

Frontline Therapy Provincial Drug Funding - Chronic Lymphocytic Leukemia (CLL) & Small Lymphocytic Lymphoma (SLL)

FRONTLINE THERAPY	Alberta	British Columbia	Manitoba	New Brunswick	Newfoundland and Labrador	Nova Scotia	Ontario	Prince Edward Island	Quebec	Saskatchewan	Yukon
Bendamustine	Patients with previously untreated CLL who are not medically fit to tolerate fludarabine based regimens	Patients with previously untreated CLL who are not medically fit to tolerate fludarabine based regimens	For previously untreated patients with CLL/SLL who are not medically fit to tolerate fludarabine-based therapy	Patients with previously untreated CLL who are not medically fit to tolerate fludarabine based regimens	Patients with previously untreated CLL	Patients with previously untreated CLL with Binet Stage B or C and WHO performance status ≤ 2 at the recommended dose, who are not medically fit to tolerate fludarabine based regimens	Patients with previously untreated CLL who are not medically fit to tolerate fludarabine based regimens	Patients with previously untreated CLL who are not medically fit to tolerate fludarabine based regimens	<i>Not listed</i>	Patients with previously untreated CLL who are not medically fit to tolerate fludarabine based regimens	<i>Not listed</i>
Bendamustine + Rituximab (BR)	Patients with previously untreated CLL who are not medically fit to tolerate fludarabine based regimens	Patients with previously untreated CLL	For first line treatment of patients with CLL with CIRS of 6 or less at time of treatment initiation AND 65 years of age or greater AND not eligible for treatment with FCR regimen.	<i>Not listed</i>	<i>Not listed</i>	<i>Not listed</i>	<i>Not listed</i>	<i>Not listed</i>	<i>Not listed</i>	<i>Not listed</i>	<i>Not listed</i>
Chlorambucil + Obinutuzumab	Patients with previously untreated CLL and adequate kidney function for whom fludarabine based treatment is considered inappropriate.	Patients with previously untreated CLL and adequate kidney function for whom fludarabine based treatment is considered inappropriate.	For previously untreated patients with CLL/SLL who are ineligible to receive fludarabine.	Patients with previously untreated CLL and adequate kidney function for whom fludarabine based treatment is considered inappropriate.	Patients with previously untreated CLL and adequate kidney function for whom fludarabine based treatment is considered inappropriate.	Patients with previously untreated CLL and adequate kidney function for whom fludarabine based treatment is considered inappropriate.	Patients with previously untreated CLL and adequate kidney function for whom fludarabine based treatment is considered inappropriate.	Patients with previously untreated CLL and adequate kidney function for whom fludarabine based treatment is considered inappropriate.	Patients with previously untreated CLL and adequate kidney function for whom fludarabine based treatment is considered inappropriate.	Patients with previously untreated CLL and adequate kidney function for whom fludarabine based treatment is considered inappropriate.	Patients with previously untreated CLL and adequate kidney function for whom fludarabine based treatment is considered inappropriate.
Chlorambucil + Rituximab	Patients with previously untreated CLL	Patients with previously untreated CLL	For previously untreated patients with CLL/SLL who are ineligible to receive fludarabine.	<i>Not listed</i>	<i>Not listed</i>	<i>Not listed</i>	<i>Not listed</i>	<i>Not listed</i>	<i>Not listed</i>	<i>Not listed</i>	<i>Not listed</i>
Fludarabine + Rituximab	Patients with previously untreated CLL	Patients with previously untreated CLL	For previously untreated patients with CLL/SLL	Patients with previously untreated CLL	Patients with previously untreated CLL	<i>Not listed</i>	Patients with previously untreated CLL	Patients with previously untreated CLL	<i>Not listed</i>	<i>Not listed</i>	<i>Not listed</i>
Fludarabine + Cyclophosphamide + Rituximab (FCR)	Patients with previously untreated CLL	Patients with previously untreated CLL	1st line treatment of patients with CLL and a CIRS of less than or equal to 6	Patients with previously untreated CLL	Patients with previously untreated CLL	<i>Not listed</i>	Patients with previously untreated CLL	Patients with previously untreated CLL	Patients with previously untreated CLL	Patients with previously untreated CLL	Patients with previously untreated CLL
Ibrutinib	Patients with previously untreated del (17p) and/or TP53 mutation CLL or SLL.	1) Patients with CLL/SLL ineligible for FCR who have received no prior therapy (FCR ineligible is defined as patients over 65 years of age, and/or a strong clinical reason that the patient is ineligible for FCR) 2) CLL/SLL patients with high risk disease e.g chromosome 17p deletion and no prior therapy	For previously untreated patients with CLL/SLL who are ineligible to receive fludarabine.	Patients with previously untreated CLL/SLL for whom fludarabine-based treatment is considered inappropriate due to high risk of relapse or refractory disease based on prognostic biomarkers.	Patients with previously untreated CLL/SLL for whom fludarabine-based treatment is considered inappropriate, such as patients with high risk disease (example: chromosome 17p deletion).	Patients with previously untreated CLL/SLL for whom fludarabine-based treatment is considered inappropriate due to high risk of relapse or refractory disease based on prognostic biomarkers.	Patients with previously untreated CLL/SLL who present with one of the following molecular markers: · chromosome 17p deletion; OR · TP 53 mutation; OR · unmutated immunoglobulin heavy chain variable region (IGHV)	<i>Not listed</i>	Patients with previously untreated CLL/SLL for whom fludarabine-based treatment is considered inappropriate, due to deletion 17p or because their health condition is too precarious (e.g. advanced age, reduced kidney function).	Patients with previously untreated CLL/SLL for whom fludarabine-based treatment is considered inappropriate due to high risk of relapse or refractory disease based on prognostic biomarkers (e.g. del17p/TP53, unmutated IGHV, del11q); or preferred oral therapy option for those who live a significant distance from a treatment centre; or if IV therapy is declined.	<i>Not listed</i>

REFERENCES:

<https://www.albertahealthservices.ca/assets/programs/ps-1025651-drug-benefit-list.pdf>
<http://www.bccancer.bc.ca/systemic-therapy-site/Documents/Policy%20and%20Forms/Benefit%20Drug%20List.pdf>
http://www.saskcancer.ca/images/pdfs/health_professionals/drug_formulary/drug_formulary/PUBLIC_Formulary_April_2020.pdf
<https://www.cancercareontario.ca/en/drugformulary/regimens>
https://www2.gnb.ca/content/dam/gnb/Departments/h-s/pdf/en/NBDrugPlan/SpecialAuthorization/Special_Authorization_Criteria-e.pdf
<https://www2.gnb.ca/content/dam/gnb/Departments/h-s/pdf/en/NBDrugPlan/NewBrunswickDrugPlansFormulary.pdf>

https://www.ramq.gouv.qc.ca/SiteCollectionDocuments/liste_med/2020/liste_med_2020_03_04_en.pdf
<https://novascotia.ca/dhw/pharmacare/documents/Criteria-for-Exception-Status-Coverage.pdf>
<https://www.princeedwardisland.ca/sites/default/files/publications/oncologyformulary.pdf>
https://www.health.gov.nl.ca/health/prescription/special_auth_drug_products.pdf
<https://www.cadth.ca/pcodr/find-a-review>
https://www.inesss.qc.ca/fileadmin/doc/INESSS/Inscription_medicaments/Med_exception/Medicaments_exception_oncologie.pdf
<http://apps.gov.yk.ca/drugs/f?p=161:9000:4112005335235041>

Therapy for Relapsed/Refractory CLL Provincial Drug Funding - Chronic Lymphocytic Leukemia (CLL) & Small Lymphocytic Lymphoma (SLL)

Therapy for Relapsed/Refractory CLL	Alberta	British Columbia	Manitoba	New Brunswick	Newfoundland and Labrador	Nova Scotia	Ontario	Prince Edward Island	Quebec	Saskatchewan	Yukon
Alemtuzumab	With fludarabine for treatment of previously treated CLL	Treatment of fludarabine-refractory CLL	Available only through Clinigen program	Not listed	Not listed	Not listed	Not listed	Available through a special access program	Not listed	Not listed	Not listed
Bendamustine	Treatment of relapsed/refractory CLL or SLL	Relapsed or refractory CLL	Not listed	Not listed	Not listed	Not listed	Not listed	Not listed	Not listed	Not listed	Not listed
Bendamustine + Rituximab	Treatment of relapsed/refractory CLL or SLL	Treatment of relapsed/refractory CLL/SLL	Not listed	Not listed	Not listed	Not listed	Not listed	For patients with previously treated CLL who have received prior anti-CD20 therapy with a treatment free interval greater than 3 years since the last dose of anti-CD20 therapy.	Not listed	Patient with previously treated CLL who have not received any antiCD20 therapy, or who have received prior antiCD20 therapy with a treatment free interval of greater than 3 years since the last dose of antiCD20 therapy <i>*Patients not eligible if they have previously received targeted therapy with ibrutinib, idelalisib or venetoclax.</i>	Not listed
Chlorambucil + Rituximab	Not listed	Treatment of previously treated CLL	Not listed	Not listed	Not listed	Not listed	Not listed	Not listed	Not listed	Not listed	Listed, but no indication provided
Chlorambucil + Obinutuzumab	Not listed	Not listed	For patients with previously treated CLL with single-agent chlorambucil and who have been disease free for 2 years or more and have not received prior CD20 antibody therapy and who are considered fludarabine-ineligible.	Not listed	For previously treated chronic lymphocytic leukemia (CLL) with single agent chlorambucil and who have been disease free for 2 years or more and have not received prior CD20 antibody therapy and who are considered fludarabine ineligible.	For previously treated chronic lymphocytic leukemia (CLL) with single agent chlorambucil and who have been disease free for 2 years or more and have not received prior CD20 antibody therapy and who are considered fludarabine ineligible.	Not listed	Patients with previously treated CLL who received single agent chlorambucil and who have been disease free for 2 years or more and have not received prior CD20 antibody therapy and who are considered fludarabine ineligible.	Not listed	CLL/SLL patients who have received prior anti-CD20 therapy with a treatment free interval of greater than 3 years since the last dose of antiCD20 therapy. <i>*Patients not eligible if they have previously received targeted therapy with ibrutinib, idelalisib or venetoclax.</i>	For previously treated chronic lymphocytic leukemia and who have been disease free for 2 years or more and have not received prior CD20 antibody therapy and who are considered fludarabine-ineligible
Fludarabine	Not listed	Not listed	For previously treated CLL/ SLL	For the treatment of patients with CLL / SLL who have failed to respond to, or have relapsed during or after previous therapy with an alkylating agent.	Not listed	For the treatment of patients with CLL / SLL who have failed to respond to, or have relapsed during or after previous therapy with an alkylating agent.	For second-line treatment of patients with CLL who have failed or are intolerant to chlorambucil	For previously treated CLL	Not listed	Not listed	Not listed
Fludarabine + Rituximab (FR)	Not listed	Treatment of previously treated CLL	For previously treated CLL/ SLL	Not listed	Not listed	Not listed	For previously treated CLL who have not received prior therapy with an anti-CD20 antibody	Not listed	Not listed	Not listed	Not listed
Fludarabine + Cyclophosphamide + Rituximab (FCR)	Not listed	Treatment of previously treated CLL	For previously treated CLL/ SLL	Not listed	Not listed	Not listed	For previously treated CLL who have not received prior therapy with an anti-CD20 antibody	Not listed	Patients with previously treated CLL who have not previously received rituximab-based therapy.	Patients with previously treated CLL who have experienced a progression free interval of at least 2-3 years since last FCR treatment. <i>*Patients not eligible if they have previously received targeted therapy with ibrutinib, idelalisib or venetoclax.</i>	For the treatment of patients with previously treated B-CLL, Binet Stage B or C

Alberta	British Columbia	Manitoba	New Brunswick	Newfoundland and Labrador	Nova Scotia	Ontario	Prince Edward Island	Quebec	Saskatchewan	Yukon	
THERAPY FOR RELAPSED/REFRACTORY CLL											
Ibrutinib	For patients with CLL/SLL who have received at least one prior therapy and are considered inappropriate for treatment or retreatment with a fludarabine based regimen.	CLL/SLL with or without chromosome 17p deletion, who have received at least one prior therapy and are considered inappropriate for treatment or retreatment with a fludarabine-based regimen including short progression-free interval after previous treatment.	For patients with CLL/SLL who have received at least one prior therapy and are considered inappropriate for treatment or retreatment with a fludarabine based regimen.	For the treatment of patients with CLL/SLL who have received at least one prior therapy and are considered inappropriate for treatment or retreatment with a fludarabine-based regimen	Patients with CLL/SLL who have received at least one prior therapy and are considered inappropriate for treatment or retreatment with a fludarabine based regimen. <i>*Sequential use of ibrutinib and Zydelig (idelalisib) will not be reimbursed. Exceptions may be considered in the case of intolerance or contraindication without disease progression, or when required as a bridge to allogeneic stem cell transplant.</i>	Patients with CLL/SLL who have received at least one prior therapy and are considered inappropriate for treatment or retreatment with a fludarabine based regimen.	Patients with CLL/SLL who have received at least one prior therapy and are considered inappropriate for treatment or retreatment with a fludarabine based regimen.	Patients with CLL/SLL who have received at least one prior therapy and are considered inappropriate for treatment or retreatment with a fludarabine based regimen.	Patients with CLL/SLL who have received at least one prior therapy, for which one line of therapy was a chemo-immunotherapy combination, and who have relapsed within 3 years since chemo-immunotherapy, or for patients who have relapsed greater than 3 years since chemo-immunotherapy and re-treatment with chemo-immunotherapy is not clinically appropriate. <i>*Ibrutinib is not funded as a sequential treatment option for patients who have progressed on Idelalisib treatment.</i>	Patients with CLL/SLL who have received at least one prior therapy and are considered inappropriate for treatment or retreatment with a fludarabine-based regimen	
Idelalisib + rituximab	Treatment of patients with relapsed CLL/SLL. Only to be used after progression on ibrutinib in 1st line as a bridge to transplant, otherwise not covered after progression on 1st line ibrutinib.	Patients with relapsed CLL/SLL who are not eligible for ibrutinib treatment. <i>*Patients are eligible to receive either idelalisib with rituximab OR ibrutinib in the relapsed/refractory setting. Idelalisib is not funded as a sequential treatment option for patients who have progressed on ibrutinib, except as a bridge to allogeneic stem cell transplant in patients who have received first line ibrutinib for high-risk disease.</i>	For the treatment of patients with relapsed CLL/SLL.	Patients with relapsed CLL/SLL. <i>*Sequential use of ibrutinib and idelalisib will not be reimbursed. Exceptions may be considered in the case of intolerance or contraindication without disease progression, or when required as a bridge to allogeneic stem cell transplant.</i>	Patients with relapsed CLL/SLL. <i>*Sequential use of ibrutinib and Zydelig (idelalisib) will not be reimbursed. Exceptions may be considered in the case of intolerance or contraindication without disease progression, or when required as a bridge to allogeneic stem cell transplant.</i>	Patients with relapsed CLL/SLL. Patients whose disease has progressed on ibrutinib therapy in the relapsed setting are not eligible to receive idelalisib. Patients who have experienced intolerance but not disease progression to ibrutinib in the relapsed setting may switch to idelalisib.		Patients with relapsed/refractory CLL who are ineligible to receive treatment with a fludarabine based regimen.	Patients with relapsed CLL/SLL. <i>*For responding patients receiving Ibrutinib, but who are experiencing toxicity with no disease progression, Idelalisib may be used as monotherapy without requirement for Rituximab</i> <i>*Idelalisib is not funded as a sequential treatment option for patients who have progressed on Ibrutinib treatment, except in the clinical setting where Idelalisib with Rituximab may be used as a bridge to allogeneic transplant</i> <i>*Chemotherapy in combination with anti-CD20 therapy is not funded after Idelalisib failure.</i>	Patients with relapsed CLL.	
Venetoclax	For patients with CLL who have received at least one prior therapy and who have failed a B-cell receptor inhibitor (BCRi), e.g. ibrutinib. Venetoclax monotherapy will also be available to patients who have an intolerance to ibrutinib.	Relapsed/refractory CLL/SLL with or without chromosome 17p deletion, who have progressed on or are intolerant to B-cell receptor pathway inhibitors (BTK inhibitors, such as ibrutinib and/or PI3-kinase inhibitors, such as idelalisib)	For patients with CLL who have received at least one prior therapy and who have failed a B-cell receptor inhibitor (BCRi), e.g. ibrutinib.	For patients with CLL/SLL who have received at least one prior therapy which must include disease progression on or intolerance to a B-cell receptor inhibitor.	For patients with CLL who have received at least one prior therapy and who have failed a B-cell receptor inhibitor (BCRi), e.g. ibrutinib.	For patients with CLL who have received at least one prior therapy and who have failed a B-cell receptor inhibitor (BCRi), e.g. ibrutinib.	For treatment of patients with CLL with 17p deletion who have received at least one prior therapy, or patients with CLL without the 17p deletion who have received at least one prior therapy and for whom there are no other available treatment options.	For patients with CLL who have received at least one prior therapy and who have failed a B-cell receptor inhibitor (BCRi).	Not listed	Patients with CLL who have received at least one prior therapy, and who have failed a BCRi (e.g. ibrutinib or idelalisib). Retreatment with venetoclax + rituximab is allowed in patients who responded to and completed 24 months of therapy, after progression free interval of at least 12 months.	As monotherapy in patients with CLL who have received at least one prior therapy and who have failed a B-cell receptor inhibitor (BCRi); Patients should have good performance status
Venetoclax + rituximab	For the treatment of patients with chronic lymphocytic leukemia (CLL) who have received at least one prior therapy, irrespective of their 17P delations status. Retreatment with venetoclax + rituximab is allowed in patients who responded to and completed 24 months of therapy, after progression free interval of at least 12 months.	For the treatment of patients with chronic lymphocytic leukemia (CLL) who have received at least one prior therapy, irrespective of their 17P delations status. Retreatment with venetoclax + rituximab is allowed in patients who responded to and completed 24 months of therapy, after progression free interval of at least 12 months.	For the treatment of patients with chronic lymphocytic leukemia (CLL) who have received at least one prior therapy, irrespective of their 17P delations status.	For the treatment of patients with chronic lymphocytic leukemia (CLL) who have received at least one prior therapy. Re-treatment with venetoclax+rituximab is allowed in patients who responded to and completed 2 years of therapy and have had a progression-free interval of at least 12 months.	For the treatment of patients with chronic lymphocytic leukemia (CLL) who have received at least one prior therapy, irrespective of their 17p deletion status. Re-treatment with Venetoclax plus Rituximab is allowed in patients who responded to and completed 2 years of progression-free interval was at least 12 months.	Patients may be retreated with venetoclax plus rituximab if they responded to and completed two years of therapy with at least 12 months of progression-free interval.	Patients with CLL who have received at least one prior therapy, irrespective of their 17p deletion status.	For adult patients with chronic lymphocytic leukemia (CLL) who have received at least one prior therapy, irrespective of their 17p deletion status.	Patients with CLL who have received at least one prior therapy.	Patients with CLL who have received at least one prior therapy, irrespective of their 17P delations status. Retreatment with venetoclax + rituximab is allowed in patients who responded to and completed 24 months of therapy, after progression free interval of at least 12 months.	For the treatment of adult patients with CLL who have received at least one prior therapy, irrespective of their 17p deletion status