

Medical Policy:

Opdivo Qvantig (nivolumab and hyaluronidase-nvhy)

| POLICY NUMBER | LAST REVIEW | ORIGIN DATE |
|---------------|----------------|----------------|
| MG.MM.PH.434 | March 24, 2025 | March 24, 2025 |

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The treating physician or primary care provider must submit to EmblemHealth, or ConnectiCare, as applicable (hereinafter jointly referred to as "EmblemHealth"), the clinical evidence that the member meets the criteria for the treatment or surgical procedure. Without this documentation and information, EmblemHealth will not be able to properly review the request preauthorization or post-payment review. The clinical review criteria expressed below reflects how EmblemHealth determines whether certain services or supplies are medically necessary. This clinical policy is not intended to pre-empt the judgment of the reviewing medical director or dictate to health care providers how to practice medicine. Health care providers are expected to exercise their medical judgment in rendering appropriate care. Health care providers are expected to exercise their medical judgment in rendering appropriate care.

EmblemHealth established the clinical review criteria based upon a review of currently available clinical information (including clinical outcome studies in the peer reviewed published medical literature, regulatory status of the technology, evidence-based guidelines of public health and health research agencies, evidence-based guidelines and positions of leading national health professional organizations, views of physicians practicing in relevant clinical areas, and other relevant factors). EmblemHealth expressly reserves the right to revise these conclusions as clinical information changes and welcomes further relevant information. Each benefit program defines which services are covered. The conclusion that a particular service or supply is medically necessary does not constitute a representation or warranty that this service or supply is covered and/or paid for by EmblemHealth, as some programs exclude coverage for services or supplies that EmblemHealth considers medically necessary.

If there is a discrepancy between this guideline and a member's benefits program, the benefits program will govern. Identification of selected brand names of devices, tests and procedures in a medical coverage policy is for reference only and is not an endorsement of any one device, test or procedure over another. In addition, coverage may be mandated by applicable legal requirements of a state, the Federal Government or the Centers for Medicare & Medicaid Services (CMS) for Medicare and Medicaid members. All coding and web site links are accurate at time of publication.

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Definitions

Opdivo Qvantig, a programmed death receptor-1 (PD-1) blocking antibody (nivolumab) and an endoglycosidase (hyaluronidase-nvhy), is indicated for the following uses in adults:

- Colorectal cancer
- Esophageal cancer
- Gastric cancer, gastroesophageal junction cancer, and esophageal adenocarcinoma
- Head and neck squamous cell carcinoma
- Hepatocellular carcinoma
- Melanoma
- Non-small cell lung cancer
- Renal cell carcinoma
- Urothelial carcinoma

Length of Authorization

Coverage will be provided for 6 months and may be renewed (unless otherwise specified).

- Neoadjuvant treatment of NSCLC without adjuvant treatment may be authorized for a maximum of three (3) neoadjuvant doses
- Neoadjuvant treatment followed by optional adjuvant treatment of NSCLC may be authorized for a maximum of four (4) neoadjuvant doses and thirteen (13) adjuvant doses.
- Adjuvant treatment of the following indications may be renewed up to a maximum of one (1) year of therapy*:
 - Cutaneous Melanoma (single agent)
 - Esophageal and Esophagogastric/Gastroesophageal Junction Cancer
 - Urothelial Carcinoma
- The following indications may be renewed up to a maximum of two (2) years of therapy: – Esophageal Squamous Cell Carcinoma
 - Esophageal and Esophagogastric/Gastroesophageal Junction Cancer
 - Gastric Cancer
 - Renal Cell Carcinoma (in combination with cabozantinib)
 - Urothelial Carcinoma (first line therapy in combination with gemcitabine and cisplatin, followed by single-agent maintenance therapy)

***Note: The maximum number of doses is dependent on the dosing frequency and duration of therapy. Refer to Section V for exact dosage.**

| Dosing Frequency | Maximum length of therapy | Maximum number of doses |
|------------------|---------------------------|-------------------------|
| 2 weeks | 1 year | 26 doses |
| | 2 years | 52 doses |
| 3 weeks | 2 years | 35 doses |
| 4 weeks | 1 year | 13 doses |
| | 2 years | 26 doses |

Dosing Limits [Medical Benefit]

Max Units (per dose and over time) [HPCS Unit]:

- 1,200 mg/20,000 units every 4 weeks

Guideline

I. Initial

1. Patient is at least 18 years of age; **AND**
2. Patient has not received previous therapy with a programmed death (PD-1/PD-L1)-directed therapy (*e.g., atezolizumab, pembrolizumab, durvalumab, avelumab, cemiplimab, dostarlimab, nivolumab/relatlimab, retifanlimab, toripalimab, tislelizumab, etc.*) unless otherwise specified (Note: Not applicable when used as switch-therapy with intravenous nivolumab); **AND**
3. Therapy will not be used concomitantly with intravenous nivolumab; **AND**
4. IV formulation of Opdivo must be used in the following:
 - i. Patients <80 kg; **OR**
 - ii. Patients requiring 900 mg/15,000 units dose*; **OR**
 - iii. Patients receiving therapy in combination with ipilimumab; **AND**

A. Urothelial Carcinoma (Bladder Cancer)

- i. Used as a single agent; **AND**
 - a. Used for disease that progressed during or following platinum-containing

- chemotherapy* OR progression with 12 months of neoadjuvant or adjuvant treatment with a platinum-containing regimen; OR
 - b. Used as adjuvant therapy in patients who are at a high risk for disease recurrence after undergoing surgical resection; OR
 - ii. Used in combination with cisplatin and gemcitabine; AND
 - a. Used as first line therapy in patient with unresectable or metastatic disease
- ** Note: High risk for disease recurrence is defined as:**
- ypT2-ypT4a or ypN+ for patients who received neoadjuvant cisplatin (excluding prostate with stromal invasion); OR
 - pT3-pT4a or pN+ for patients who did not receive neoadjuvant cisplatin and are also ineligible for or refused adjuvant cisplatin therapy (excluding ureter or renal pelvis)

B. Colorectal Cancer (CRC)

- i. Patient has microsatellite instability-high (MSI-H)/mismatch repair deficient (dMMR) disease as determined by an FDA-approved or CLIA-compliant test; **AND**
- ii. Used as a single agent; **AND**
- iii. Used as subsequent therapy for metastatic disease; **AND**
- iv. Patient has disease progression following treatment with a fluoropyrimidine, oxaliplatin and irinotecan regimen

C. Gastric Cancer/Esophageal Cancer/Gastroesophageal Junction (GEJ) Cancer

- i. Used as a single agent; **AND**
 - a. Used as adjuvant treatment of completely resected esophageal or GEJ cancer with residual pathologic disease in patients who have received neoadjuvant chemoradiotherapy (CRT).; **OR**
 - b. Used as subsequent therapy after prior fluoropyrimidine- and platinum-based chemotherapy; **AND**
 - 1. Used for unresectable advanced, recurrent, or metastatic esophageal squamous cell carcinoma (ESCC); **OR**
 - c. Used in combination with fluoropyrimidine- and platinum-containing chemotherapy; **AND**
 - 1. Used as first-line therapy; **AND**
 - a. Used in patients with unresectable, advanced or metastatic esophageal squamous cell carcinoma (ESCC); **OR**
 - b. Used for advanced or metastatic gastric, GEJ, or esophageal adenocarcinomas

D. Squamous Cell Carcinoma of the Head and Neck (SCCHN)

- i. Used as single-agent therapy; **AND**
- ii. Patient has metastatic disease with disease progression on or after platinum-based therapy; **AND**
- iii. Patient does not have disease of the nasopharynx

E. Hepatocellular Carcinoma (HCC)

- i. Used as a single agent; **AND**
- ii. Patient was previously treated with sorafenib following treatment with nivolumab/ipilimumab

F. Renal Cell Carcinoma (RCC)

- i. Used as a single agent; **AND**
 - a. Used as first line therapy in patients with intermediate or poor risk disease following previous treatment with nivolumab and ipilimumab combination therapy; **OR**
 - b. Used as subsequent therapy after prior anti-angiogenic therapy; **OR**
- ii. Used in combination with cabozantinib (Cabometyx only); **AND**
 - a. Used as first-line therapy for advanced disease

G. Cutaneous Melanoma

- i. Used as single agent therapy; **AND**
 - a. Used as first-line therapy for unresectable or metastatic disease; **OR**
 - b. Used as subsequent therapy for unresectable or metastatic disease after prior nivolumab/ipilimumab combination therapy; **OR**
 - c. Used as adjuvant treatment and patient has stage IIB, stage IIC, stage III or metastatic disease and has undergone complete resection

H. Non-Small Cell Lung Cancer (NSCLC)

- i. Used as single-agent therapy; **AND**
 - a. Used for metastatic disease; **AND**
 - b. Used as subsequent therapy on or after platinum-based chemotherapy (Note: Patients with EGFR or ALK genomic tumor aberrations should have disease progression on targeted therapies prior to receiving Opdivo Qvantig); **OR**
- ii. Used in combination with platinum-doublet chemotherapy; **AND**
 - a. Used as neoadjuvant therapy in patients who have resectable (tumors ≥ 4 cm or node positive) disease; **OR**
 - b. Used as neoadjuvant therapy in resectable disease with the option of continuing to single-agent Opdivo Qvantig therapy as adjuvant treatment after surgery

II. Renewal

Coverage may be renewed based upon the following criteria:

1. Patient continues to meet universal and other indication-specific relevant criteria such as concomitant therapy requirements **AND**
2. Disease response with treatment as defined by stabilization of disease or decrease in size of tumor or tumor spread; **AND**
3. Absence of unacceptable toxicity from the drug. Examples of unacceptable toxicity include: immune-mediated adverse reactions (*e.g., pneumonitis, hepatitis, colitis, endocrinopathies, nephritis/renal dysfunction, rash/dermatitis [including Stevens-Johnson syndrome (SJS), drug rash with eosinophilia and systemic symptoms (DRESS), and toxic epidermal necrolysis (TEN)]*), myocarditis, pericarditis, vasculitis, solid organ transplant rejection, etc.), severe infusion-related reactions, complications of allogeneic hematopoietic stem cell transplantation (HSCT), etc.

NSCLC (neoadjuvant/adjuvant treatment)

- Patient has not exceeded a maximum of twelve (12) months (13 cycles) of therapy

Notes:

- Patients responding to therapy who relapse ≥ 6 months after discontinuation due to duration are eligible to re-initiate PD-directed therapy.
- Patients previously presenting with aggressive disease who are exhibiting stable disease on treatment as their best response (or if therapy improved performance status) may be eligible for continued therapy without interruption or discontinuation.
- Patients who complete adjuvant therapy and progress ≥ 6 months after discontinuation are eligible to re-initiate PD-directed therapy for metastatic disease.
- Patients whose tumors, upon re-biopsy, demonstrate a change in actionable mutation (e.g., MSS initial biopsy; MSI-H subsequent biopsy) may be eligible to re-initiate PD-directed therapy and will be evaluated on a case-by-case basis.

Dosing and Administration

| Indication | Dose |
|--------------------------|---|
| Renal Cell Carcinoma | <ul style="list-style-type: none"> - 600 mg/10,000 units every 2 weeks or 1,200 mg/20,000 units every 4 weeks, until disease progression or unacceptable toxicity. - 600 mg/10,000 units every 2 weeks or 1,200 mg/20,000 units every 4 weeks administered in combination with cabozantinib 40 mg once daily without food, up to a maximum of 2 years of therapy. |
| Melanoma | <ul style="list-style-type: none"> - 600 mg/10,000 units every 2 weeks or 1,200 mg/20,000 units every 4 weeks, until disease progression or unacceptable toxicity. <p><i>Note: For adjuvant therapy, treat until disease recurrence or unacceptable toxicity for up to 1 year</i></p> |
| NSCLC | <p>Neoadjuvant and adjuvant treatment</p> <ul style="list-style-type: none"> - 900 mg/15,000 units with platinum-doublet chemotherapy on the same day every 3 weeks for 3 cycles, then single-agent Opdivo Qvantig 1,200 mg/20,000 units every 4 weeks after surgery for up to 13 cycles. <p>Metastatic non-small cell lung cancer</p> <ul style="list-style-type: none"> - 600 mg/10,000 units every 2 weeks or 1,200 mg/20,000 units every 4 weeks, until disease progression or unacceptable toxicity. |
| SCCHN | <ul style="list-style-type: none"> - 600 mg/10,000 units every 2 weeks or 1,200 mg/20,000 units every 4 weeks, until disease progression or unacceptable toxicity. |
| Urothelial Carcinoma | <p>Urothelial carcinoma</p> <ol style="list-style-type: none"> 600 mg/10,000 units every 2 weeks or 1,200 mg/20,000 units every 4 weeks, until disease progression or unacceptable toxicity. <p><i>Note: For adjuvant therapy, treat until disease recurrence or unacceptable toxicity for up to 1 year</i></p> <p>First-line unresectable or metastatic urothelial carcinoma</p> <ul style="list-style-type: none"> - * 900 mg/15,000 units every 3 weeks with cisplatin and gemcitabine on the same day for up to 6 cycles, then 600 mg/10,000 units every 2 weeks or 1,200 mg/20,000 units every 4 weeks, up to a maximum of 2 years of therapy. |
| Colorectal Carcinoma | <ul style="list-style-type: none"> - 600 mg/10,000 units every 2 weeks or 1,200 mg/20,000 units every 4 weeks, until disease progression or unacceptable toxicity. |
| Hepatocellular Carcinoma | <ul style="list-style-type: none"> - 600 mg/10,000 units every 2 weeks or 1,200 mg/20,000 units every 4 weeks, until disease progression or unacceptable toxicity. |

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| Esophageal Squamous Cell Cancer | <ul style="list-style-type: none"> - 600 mg/10,000 units every 2 weeks or 1,200 mg/20,000 units every 4 weeks, until disease progression or unacceptable toxicity. OR - 600 mg/10,000 units every 2 weeks or 1,200 mg/20,000 units every 4 weeks administered in combination with fluoropyrimidine- and platinum-containing chemotherapy, up to a maximum of 2 years of therapy. |
| Gastric Cancer, GEJ Cancer, and Esophageal Adenocarcinoma | <ul style="list-style-type: none"> - 600 mg/10,000 units every 2 weeks in combination with fluoropyrimidine- and platinum-containing chemotherapy every 2 weeks, up until a maximum of 2 years of therapy. - * 900 mg/15,000 units every 3 weeks with fluoropyrimidine- and platinum containing chemotherapy every 3 weeks, up until a maximum of 2 years of therapy. <p><i>Note: For adjuvant therapy in esophageal and GEJ, treat until disease recurrence or unacceptable toxicity for up to 1 year</i></p> |

Note:

- **The 900 mg/15,000 units dosing is listed in the prescribing information; however, the IV formulation of nivolumab must be used instead to prevent wastage.*
- *Opdivo Qvantig (nivolumab and hyaluronidase-nvhy) has different dosage and administration instructions than intravenous nivolumab products.*
- *Opdivo Qvantig is for subcutaneous use only in the abdomen or thigh.*
- *Opdivo Qvantig is to be administered by a healthcare professional only.*
- *Opdivo Qvantig is for subcutaneous use only administered over 3-5 minutes.*

Applicable Procedure Codes

| Code | Description |
|-------|--|
| J9999 | Not otherwise classified, antineoplastic drugs |
| C9399 | Unclassified drugs or biologics (hospital outpatient use only) |

Applicable NDCs

| Code | Description |
|---------------|--|
| 00003-6120-xx | Opdivo Qvantig single-dose vial providing 600 mg nivolumab and 10,000 units hyaluronidase per 5 mL (120 mg/ 2,000 units per mL): |

ICD-10 Diagnoses

| Code | Description |
|-------|--|
| C00.0 | Malignant neoplasm of external upper lip |
| C00.1 | Malignant neoplasm of external lower lip |
| C00.2 | Malignant neoplasm of external lip, unspecified |
| C00.3 | Malignant neoplasm of upper lip, inner aspect |
| C00.4 | Malignant neoplasm of lower lip, inner aspect |
| C00.5 | Malignant neoplasm of lip, unspecified, inner aspect |
| C00.6 | Malignant neoplasm of commissure of lip, unspecified |
| C00.8 | Malignant neoplasm of overlapping sites of lip |
| C00.9 | Malignant neoplasm of lip, unspecified |
| C01 | Malignant neoplasm of base of tongue |
| C02.0 | Malignant neoplasm of dorsal surface of tongue |
| C02.1 | Malignant neoplasm of border of tongue |

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| C02.2 | Malignant neoplasm of ventral surface of tongue |
| C02.3 | Malignant neoplasm of anterior two-thirds of tongue, part unspecified |
| C02.4 | Malignant neoplasm of lingual tonsil |
| C02.8 | Malignant neoplasm of overlapping sites of tongue |
| C02.9 | Malignant neoplasm of tongue, unspecified |
| C03.0 | Malignant neoplasm of upper gum |
| C03.1 | Malignant neoplasm of lower gum |
| C03.9 | Malignant neoplasm of gum, unspecified |
| C04.0 | Malignant neoplasm of anterior floor of mouth |
| C04.1 | Malignant neoplasm of lateral floor of mouth |
| C04.8 | Malignant neoplasm of overlapping sites of floor of mouth |
| C04.9 | Malignant neoplasm of floor of mouth, unspecified |
| C05.0 | Malignant neoplasm of hard palate |
| C05.1 | Malignant neoplasm of soft palate |
| C05.8 | Malignant neoplasm of overlapping sites of palate |
| C05.9 | Malignant neoplasm of palate, unspecified |
| C06.0 | Malignant neoplasm of cheek mucosa |
| C06.2 | Malignant neoplasm of retromolar area |
| C06.80 | Malignant neoplasm of overlapping sites of unspecified parts of mouth |
| C06.89 | Malignant neoplasm of overlapping sites of other parts of mouth |
| C06.9 | Malignant neoplasm of mouth, unspecified |
| C09.0 | Malignant neoplasm of tonsillar fossa |
| C09.1 | Malignant neoplasm of tonsillar pillar (anterior) (posterior) |
| C09.8 | Malignant neoplasm of overlapping sites of tonsil |
| C09.9 | Malignant neoplasm of tonsil, unspecified |
| C10.0 | Malignant neoplasm of vallecula |
| C10.1 | Malignant neoplasm of anterior surface of epiglottis |
| C10.2 | Malignant neoplasm of lateral wall of oropharynx |
| C10.3 | Malignant neoplasm of posterior wall of oropharynx |
| C10.4 | Malignant neoplasm of branchial cleft |
| C10.8 | Malignant neoplasm of overlapping sites of oropharynx |
| C10.9 | Malignant neoplasm of oropharynx, unspecified |
| C11.0 | Malignant neoplasm of superior wall of nasopharynx |
| C11.1 | Malignant neoplasm of posterior wall of nasopharynx |
| C11.2 | Malignant neoplasm of lateral wall of nasopharynx |
| C11.3 | Malignant neoplasm of anterior wall of nasopharynx |
| C11.8 | Malignant neoplasm of overlapping sites of nasopharynx |
| C11.9 | Malignant neoplasm of nasopharynx, unspecified |
| C12 | Malignant neoplasm of pyriform sinus |
| C13.0 | Malignant neoplasm of postcricoid region |
| C13.1 | Malignant neoplasm of aryepiglottic fold, hypopharyngeal aspect |
| C13.2 | Malignant neoplasm of posterior wall of hypopharynx |
| C13.8 | Malignant neoplasm of overlapping sites of hypopharynx |
| C13.9 | Malignant neoplasm of hypopharynx, unspecified |
| C14.0 | Malignant neoplasm of pharynx, unspecified |
| C14.2 | Malignant neoplasm of Waldeyer's ring |

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| C14.8 | Malignant neoplasm of overlapping sites of lip, oral cavity and pharynx |
| C15.3 | Malignant neoplasm of upper third of esophagus |
| C15.4 | Malignant neoplasm of middle third of esophagus |
| C15.5 | Malignant neoplasm of lower third of esophagus |
| C15.8 | Malignant neoplasm of overlapping sites of esophagus |
| C15.9 | Malignant neoplasm of esophagus, unspecified |
| C16.0 | Malignant neoplasm of cardia |
| C16.1 | Malignant neoplasm of fundus of stomach |
| C16.2 | Malignant neoplasm of body of stomach |
| C16.3 | Malignant neoplasm of pyloric antrum |
| C16.4 | Malignant neoplasm of pylorus |
| C16.5 | Malignant neoplasm of lesser curvature of stomach, unspecified |
| C16.6 | Malignant neoplasm of greater curvature of stomach, unspecified |
| C16.8 | Malignant neoplasm of overlapping sites of stomach |
| C16.9 | Malignant neoplasm of stomach, unspecified |
| C18.0 | Malignant neoplasm of cecum |
| C18.2 | Malignant neoplasm of ascending colon |
| C18.3 | Malignant neoplasm of hepatic flexure |
| C18.4 | Malignant neoplasm of transverse colon |
| C18.5 | Malignant neoplasm of splenic flexure |
| C18.6 | Malignant neoplasm of descending colon |
| C18.7 | Malignant neoplasm of sigmoid colon |
| C18.8 | Malignant neoplasm of overlapping sites of colon |
| C18.9 | Malignant neoplasm of colon, unspecified |
| C19 | Malignant neoplasm of rectosigmoid junction |
| C20 | Malignant neoplasm of rectum |
| C22.0 | Liver cell carcinoma |
| C22.8 | Malignant neoplasm of liver, primary, unspecified as to type |
| C22.9 | Malignant neoplasm of liver, not specified as primary or secondary |
| C30.0 | Malignant neoplasm of nasal cavity |
| C31.0 | Malignant neoplasm of maxillary sinus |
| C31.1 | Malignant neoplasm of ethmoidal sinus |
| C32.0 | Malignant neoplasm of glottis |
| C32.1 | Malignant neoplasm of supraglottis |
| C32.2 | Malignant neoplasm of subglottis |
| C32.3 | Malignant neoplasm of laryngeal cartilage |
| C32.8 | Malignant neoplasm of overlapping sites of larynx |
| C32.9 | Malignant neoplasm of larynx, unspecified |
| C33 | Malignant neoplasm of trachea |
| C34.00 | Malignant neoplasm of unspecified main bronchus |
| C34.01 | Malignant neoplasm of right main bronchus |
| C34.02 | Malignant neoplasm of left main bronchus |
| C34.10 | Malignant neoplasm of upper lobe, unspecified bronchus or lung |
| C34.11 | Malignant neoplasm of upper lobe, right bronchus or lung |
| C34.12 | Malignant neoplasm of upper lobe, left bronchus or lung |
| C34.2 | Malignant neoplasm of middle lobe, bronchus or lung |

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| C34.30 | Malignant neoplasm of lower lobe, unspecified bronchus or lung |
| C34.31 | Malignant neoplasm of lower lobe, right bronchus or lung |
| C34.32 | Malignant neoplasm of lower lobe, left bronchus or lung |
| C34.80 | Malignant neoplasm of overlapping sites of unspecified bronchus and lung |
| C34.81 | Malignant neoplasm of overlapping sites of right bronchus and lung |
| C34.82 | Malignant neoplasm of overlapping sites of left bronchus and lung |
| C34.90 | Malignant neoplasm of unspecified part of unspecified bronchus or lung |
| C34.91 | Malignant neoplasm of unspecified part of right bronchus or lung |
| C34.92 | Malignant neoplasm of unspecified part of left bronchus or lung |
| C43.0 | Malignant melanoma of lip |
| C43.111 | Malignant melanoma of right upper eyelid, including canthus |
| C43.112 | Malignant melanoma of right lower eyelid, including canthus |
| C43.121 | Malignant melanoma of left upper eyelid, including canthus |
| C43.122 | Malignant melanoma of left lower eyelid, including canthus |
| C43.20 | Malignant melanoma of unspecified ear and external auricular canal |
| C43.21 | Malignant melanoma of right ear and external auricular canal |
| C43.22 | Malignant melanoma of left ear and external auricular canal |
| C43.30 | Malignant melanoma of unspecified part of face |
| C43.31 | Malignant melanoma of nose |
| C43.39 | Malignant melanoma of other parts of face |
| C43.4 | Malignant melanoma of scalp and neck |
| C43.51 | Malignant melanoma of anal skin |
| C43.52 | Malignant melanoma of skin of breast |
| C43.59 | Malignant melanoma of other part of trunk |
| C43.60 | Malignant melanoma of unspecified upper limb, including shoulder |
| C43.61 | Malignant melanoma of right upper limb, including shoulder |
| C43.62 | Malignant melanoma of left upper limb, including shoulder |
| C43.70 | Malignant melanoma of unspecified lower limb, including hip |
| C43.71 | Malignant melanoma of right lower limb, including hip |
| C43.72 | Malignant melanoma of left lower limb, including hip |
| C43.8 | Malignant melanoma of overlapping sites of skin |
| C43.9 | Malignant melanoma of skin, unspecified |
| C44.00 | Unspecified malignant neoplasm of skin of lip |
| C44.02 | Squamous cell carcinoma of skin of lip |
| C44.09 | Other specified malignant neoplasm of skin of lip |
| C64.1 | Malignant neoplasm of right kidney, except renal pelvis |
| C64.2 | Malignant neoplasm of left kidney, except renal pelvis |
| C64.9 | Malignant neoplasm of unspecified kidney, except renal pelvis |
| C65.1 | Malignant neoplasm of right renal pelvis |
| C65.2 | Malignant neoplasm of left renal pelvis |
| C65.9 | Malignant neoplasm of unspecified renal pelvis |
| C66.1 | Malignant neoplasm of right ureter |
| C66.2 | Malignant neoplasm of left ureter |
| C66.9 | Malignant neoplasm of unspecified ureter |
| C67.0 | Malignant neoplasm of trigone of bladder |
| C67.1 | Malignant neoplasm of dome of bladder |

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| C67.2 | Malignant neoplasm of lateral wall of bladder |
| C67.3 | Malignant neoplasm of anterior wall of bladder |
| C67.4 | Malignant neoplasm of posterior wall of bladder |
| C67.5 | Malignant neoplasm of bladder neck |
| C67.6 | Malignant neoplasm of ureteric orifice |
| C67.7 | Malignant neoplasm of urachus |
| C67.8 | Malignant neoplasm of overlapping sites of bladder |
| C67.9 | Malignant neoplasm of bladder, unspecified |
| C68.0 | Malignant neoplasm of urethra |
| C76.0 | Malignant neoplasm of head, face and neck |
| C77.0 | Secondary and unspecified malignant neoplasm of lymph nodes of head, face and neck |
| C78.00 | Secondary malignant neoplasm of unspecified lung |
| C78.01 | Secondary malignant neoplasm of right lung |
| C78.02 | Secondary malignant neoplasm of left lung |
| C78.6 | Secondary malignant neoplasm of retroperitoneum and peritoneum |
| C78.7 | Secondary malignant neoplasm of liver and intrahepatic bile duct |
| D09.0 | Carcinoma in situ of bladder |
| D37.01 | Neoplasm of uncertain behavior of lip |
| D37.02 | Neoplasm of uncertain behavior of tongue |
| D37.05 | Neoplasm of uncertain behavior of pharynx |
| D37.09 | Neoplasm of uncertain behavior of other specified sites of the oral cavity |
| D37.1 | Neoplasm of uncertain behavior of stomach |
| D37.8 | Neoplasm of uncertain behavior of other specified digestive organs |
| D37.9 | Neoplasm of uncertain behavior of digestive organ, unspecified |
| D38.0 | Neoplasm of uncertain behavior of larynx |
| D38.5 | Neoplasm of uncertain behavior of other respiratory organs |
| D38.6 | Neoplasm of uncertain behavior of respiratory organ, unspecified |
| Z85.00 | Personal history of malignant neoplasm of unspecified digestive organ |
| Z85.01 | Personal history of malignant neoplasm of esophagus |
| Z85.028 | Personal history of other malignant neoplasm of stomach |
| Z85.118 | Personal history of other malignant neoplasm of bronchus and lung |
| Z85.51 | Personal history of malignant neoplasm of bladder |
| Z85.59 | Personal history of malignant neoplasm of other urinary tract organ |

Revision History

| Company(ies) | DATE | REVISION |
|-----------------------------|------------|------------|
| EmblemHealth & ConnectiCare | 03/24/2025 | New Policy |

References

1. Opdivo Qvantig [package insert]. Princeton, NJ; Bristol-Myers Squibb, Inc; December 2024. Accessed January 2025.
2. Referenced with permission from the NCCN Drugs & Biologics Compendium (NCCN Compendium®) nivolumab. National Comprehensive Cancer Network, 2024. The NCCN Compendium® is a derivative work of the NCCN Guidelines®. NATIONAL COMPREHENSIVE CANCER NETWORK®, NCCN®, and NCCN GUIDELINES® are trademarks owned by the National Comprehensive Cancer Network, Inc. To view the most recent and complete version of the Compendium, go online to NCCN.org.