



Division: Pharmacy Policy	Subject: State of Florida's Agency for Health Care Administration's Prior Authorization Criteria
Original Development Date: Original Effective Date: Revision Date:	March 24, 2021, April 21, 2021

BREYANZI[®] (lisocabtagene maraleucel)

LENGTH OF AUTHORIZATION: Date of service

ADMINISTRATION: Hospital inpatient or outpatient setting

REVIEW CRITERIA:

- Patient must be 18 years of age or older.
- Must have relapsed or refractory large B-cell lymphoma including diffuse large B-cell lymphoma (DLBCL), high-grade B-cell lymphoma, primary mediastinal large B-cell lymphoma, and follicular lymphoma grade 3B.
- Must have tried and failed at least two lines of systemic therapy.

DOSING:

- A single dose of BREYANZI contains 50 to 110 x 10⁶ CAR-positive viable T cells (consisting of 1:1 CAR-positive T cells of the CD8 and CD4 components), with each component supplied separately in one to four single-dose 5 mL vials.

* Because of the risk of Cytokine Release Syndrome and neurological toxicities, BREYANZI[®] is available only through a restricted program under a Risk Evaluation and Mitigation Strategy (REMS) called the BREYANZI REMS. Further information is available at www.BreyanziREMS.com or 1-888-423-5436).