DEPARTMENT OF HEALTH & HUMAN SERVICES
Centers for Medicare & Medicaid Services
Center for Medicare
7500 Security Boulevard
Baltimore, Maryland 21244-1850

DATE: November 5, 2021

TO: All Medicare Advantage Organizations

SUBJECT: Off-label Use of Drugs in Medicare Advantage Step Therapy Programs[1]

CMS reminds Medicare Advantage (MA) plans that Part B step therapy programs may include a drug supported only by an off-label indication if the off-label indication is supported by widely used treatment guidelines or clinical literature that CMS considers to represent best practices.

Avastin is widely used off-label for ophthalmic indications and considered a clinically acceptable treatment for eye issues such as macular degeneration and macular edema. There is sufficient literature to support allowing off-label use of Avastin in step therapy protocols as a first step to Lucentis for the treatment of eye issues in compliance with §422.136(c).

CMS has learned that some MA plans are using biosimilars to Avastin (i.e., Zirabev and Mvasi) as substitutes for Avastin to treat eye issues such as macular degeneration and macular edema in Part B drug step therapy protocols. These biosimilars are not labeled for use in treatment of eye issues. Unlike Avastin, the off-label use of these biosimilars in MA step therapy programs is not supported by widely used treatment guidelines or clinical literature. CMS remains concerned that off-label use of drugs without support from clinical research is potentially dangerous to MA enrollees and is prohibited by regulation. Currently, there is not enough clinical literature to support the use of Zirabev or Mvasia as first steps to Lucentis, and as a result, these biosimilars do not meet the requirements at §422.136(c) as an allowable and appropriate off-label use of a drug in step therapy for Part B drugs.

We reiterate that a drug may **only** be used in Part B step therapy programs for on-label indications when the requirements of §422.136(b) are met and for off-label uses only if (as required per §422.136(c)) the off-label use of the drug is supported by widely used treatment guidelines or clinical literature that CMS considers to represent best practices.

Finally, we clarify that biosimilars are allowable in Part B step therapy program requirements. Biosimilar alternatives may be used in Part B step therapy programs when the requirements at §422.136 are met, and specifically, as required per 42 CFR § 422.136(c), an MA plan may use biosimilar alternatives in its Part B step therapy program if the off-label use of the drug is supported by widely used treatment guidelines or clinical literature that CMS considers to represent best practices.

[1]The contents of this document do not have the force and effect of law and are not meant to bind the public in any way, unless specifically incorporated into a contract. This document is intended only to provide clarity to the public regarding existing requirements under the law.