Mass General Brigham
Health Plan

T-Cell Immunotherapy
Lunsumio (mosunetuzumab-axgb)
Effective 06/01/2025

Plan	☒ MassHealth ☐Commercial/Exchange	**Program Type**	☒ Prior Authorization ☐ Quantity Limit ☐ Step Therapy
Benefit	☐ Pharmacy Benefit ☒ Medical Benefit		
Specialty Limitations	N/A		
Contact Information	**Medical Benefit** **Pharmacy Benefit**	Phone: 833-895-2611 Phone: 800-711-4555	Fax: 888-656-6671 Fax: 844-403-1029
Exceptions	N/A		

Overview
Lunsumio (mosunetuzumab-axgb) is an intravenous "off-the-shelf" T-cell-redirecting, bispecific antibody that is indicated for the treatment of adult patients with relapsed or refractory follicular lymphoma after two or more lines of systemic therapy.

Coverage Guidelines
Authorization may be reviewed on a case by case basis for members who are new to the plan currently receiving treatment with requested medication excluding when the product is obtained as samples or via manufacturer's patient assistance programs.
OR
Authorization may be granted for members when all the following criteria are met, and documentation is provided:

1. Diagnosis of relapsed or refractory follicular lymphoma (FL)
2. Prescriber is a hematologist or oncologist
3. Appropriate dosing
4. Member is ≥ 18 years of age on treatment date
5. Inadequate response or adverse reaction to TWO lines of systemic therapies including at least one anti-CD20 monoclonal antibody *(e.g., rituximab, obinutuzumab – see Appendix)*

Limitations

1. Initial approvals will be granted for 12 months.
2. Reauthorizations: There is currently no data to support repeat dosing of extended use of Lunsumio beyond 17 cycles. Requests for reauthorization will be reviewed on a case by case basis.

Appendix
Commonly Used Regimens for FL
According to the NCCN guidelines, the following regimens may be used for the treatment of FL:

- Bendamustine + rituximab or obinutuzumab
- CHOP (cyclophosphamide, doxorubicin, vincristine and prednisone) + rituximab or obinutuzumab

- CVP (cyclophosphamide, vincristine and prednisone) + rituximab or obinutuzumab
- Lenalidomide + rituximab
- Single agent rituximab or obinutuzumab

References

1. Lunsumio [package insert on the internet]. South San Francisco (CA): Genentech; 2024 Dec [cited 2023 Feb 16]. Available from: https://www.accessdata.fda.gov/drugsatfda_docs/label/2022/761263s000lbl.pdf.

Review History

07/12/23 - Reviewed and created for P&T. New drug, Lunsumio (mosunetuzumab-axgb), will require PA through medical benefit. Effective 7/31/23.
05/15/25 – Reviewed and updated for P&T. Updated formatting and references. Initial approval duration increased to 12 months. Updated language of trials from ≥2 lines of systemic therapies to indicating just 2. Effective 6/1/25