



TYROSINE KINASE INHIBITORS FOR NSCLC PA SUMMARY

MEDICATION NAMES: Gilotrif, Xalkori

STATUS: Preferred

NOTE: Criteria for Tarceva is located in a separate document titled "Tarceva".

LENGTH OF AUTHORIZATION: 1 Year

PA CRITERIA:

Criteria for Gilotrif

- ❖ Approvable for metastatic non-small cell lung cancer (NSCLC) if the member has tested positive for epidermal growth factor receptor (EGFR) exon 19 deletions or exon 21 substitution mutations as detected by an FDA-approved test

Criteria for Xalkori

- ❖ Approvable for non-small cell lung cancer (NSCLC), locally advanced or metastatic, if the member has tested positive for anaplastic lymphoma kinase (ALK) positive NSCLC

EXCEPTIONS:

- ❖ Exceptions to these conditions of coverage are considered through the prior authorization process.
- ❖ The Prior Authorization process may be initiated by calling **Catamaran at 1-866-525-5827**.

PA and APPEAL PROCESS:

- ❖ For online access to the PA process please go to www.mmis.georgia.gov/portal, highlight the pharmacy link on the top right side of the page, and click on "prior approval process".

QUANTITY LEVEL LIMITATIONS:

- ❖ For online access to the current Quantity Level Limit please go to www.mmis.georgia.gov/portal, highlight Provider Information and click on Provider Manuals. Scroll to the page with Pharmacy Services Part II and select that manual.