

COMETRIQ (cabozantinib)

Pre - PA Allowance

None

Prior-Approval Requirements

Age 18 years of age or older

Diagnoses

Patient must have **ONE** of the following:

- 1. Medullary Thyroid Cancer (MTC)
 - a. Progressive and/or metastatic
- 2. Non-small cell lung cancer (NSCLC)

AND ALL of the following for ALL indications:

- 1. NO recent history of hemorrhage or hemoptysis
- 2. Prescriber agrees to discontinue therapy if gastrointestinal (GI) perforation or fistula formation occurs

Prior - Approval Limits

Duration 12 months

Prior - Approval Renewal Requirements

Age 18 years of age or older

Diagnoses

Patient must have **ONE** of the following:

- 1. Medullary Thyroid Cancer (MTC)
 - a. Progressive and/or metastatic
- 2. Non-small cell lung cancer (NSCLC)

AND NONE of the following for **ALL** indications:

- 1. Hemorrhage or hemoptysis
- 2. Gastrointestinal (GI) perforations or fistula

Prior - Approval Renewal Limits

Same as above