

Pre - PA Allowance

None

Prior-Approval Requirements

Age 18 years of age or older

Diagnosis

Patient must have the following:

1. Advanced renal cell carcinoma
 - a. Obtain ALT, AST and bilirubin prior to initiation of therapy and monitor during therapy

AND ONE of the following:

- a. Failure of one prior first-line systemic therapy
- b. First-line treatment in combination with Keytruda (pembrolizumab)
- c. First-line treatment in combination with Bavencio (avelumab)

Prior - Approval Limits

Duration 12 months

Prior – Approval *Renewal* Requirements

Age 18 years of age or older

Diagnosis

Patient must have the following:

1. Advanced renal cell carcinoma

AND NONE of the following:

- a. Gastrointestinal perforation or fistula
- b. Signs and symptoms of reversible posterior leukoencephalopathy syndrome (RPLS)
- c. Severe hepatic impairment

Prior - Approval *Renewal* Limits

Same as above