BlueCross BlueShield
Federal Employee Program

TABRECTA
(capmatinib)

Pre - PA Allowance

None

Prior-Approval Requirements

Age 18 years of age or older

Diagnosis

Patient must have the following:

Metastatic non-small cell lung cancer (NSCLC)

AND ALL of the following:

a. Tumor specimens show **ONE** of the following:
    i. High-level mesenchymal-epithelial transition (MET) amplification
    ii. MET exon 14 skipping as detected by an FDA-approved test
b. Prescriber agrees to monitor for new or worsening pulmonary symptoms indicative of interstitial lung disease (ILD)/pneumonitis
c. Patient has had baseline liver function tests (LFTs) performed before starting Tabrecta and prescriber agrees to monitor LFTs
d. Females of reproductive potential **only**: patient will be advised to use effective contraception during treatment with Tabrecta and for 1 week after the last dose
e. Males with female partners of reproductive potential **only**: patient will be advised to use effective contraception during treatment with Tabrecta and for 1 week after the last dose

Prior - Approval Limits

Quantity 336 tablets per 84 days

Duration 12 months

Prior – Approval *Renewal* Requirements

Age 18 years of age or older

Diagnosis

TABRECTA
(capmatinib)

Patient must have the following:

Metastatic non-small cell lung cancer (NSCLC)

AND ALL of the following:

a. **NO** disease progression or unacceptable toxicity
b. Prescriber agrees to monitor for new or worsening pulmonary symptoms indicative of interstitial lung disease (ILD)/pneumonitis
c. Prescriber agrees to monitor liver function tests (LFTs)
d. Females of reproductive potential **only**: patient will be advised to use effective contraception during treatment with Tabrecta and for 1 week after the last dose
e. Males with female partners of reproductive potential **only**: patient will be advised to use effective contraception during treatment with Tabrecta and for 1 week after the last dose

Prior - Approval *Renewal* Limits

Same as above