



## NK1 ANTAGONISTS

**Akynzeo capsules (netupitant and palonosetron)**

**Akynzeo injection (fosnetupitant and palonosetron)**

**Cinvanti injection, Emend capsules, Emend oral suspension (aprepitant)**

**Emend injection, Focinvez\* injection (fosaprepitant)**

**Varubi tablets (rolapitant)**

\*Product covered on the medical benefit only

## Pre - PA Allowance

### Quantity

Medication	Quantity Limit
Akynzeo 300 mg/0.5 mg capsules	6 capsules per 90 days
Akynzeo 235 mg/0.25 mg injection	6 vials per 90 days
Cinvanti 130 mg injection	6 vials per 90 days
Aprepitant 40 mg	1 capsule per 90 days
Emend 80 mg	12 capsules per 90 days
Emend 125 mg	6 capsules per 90 days
Emend Bi-pack (contains two 80 mg caps)	6 packs per 90 days
Emend Tri-pack (contains one 125 mg and two 80 mg)	6 packs per 90 days
Emend 125 mg suspension	6 kits per 90 days
Emend 150 mg injection	6 vials per 90 days
Focinvez 150 mg injection	6 vials per 90 days
Varubi 90 mg tablets	12 tablets per 90 days

\*\*Quantities are based 2 chemotherapy treatments per month

## Prior-Approval Requirements

*Prior authorization is not required if prescribed by an oncologist and/or the member has paid pharmacy claims for an oncology medication(s) in the past 6 months*

### Akynzeo capsules and injection

#### Diagnosis

Patient must have the following:

1. Prevention of acute or delayed nausea and vomiting
  - a. 18 years of age or older
  - b. Undergoing chemotherapy for cancer
    - i. **Akynzeo injection only:** chemotherapy is highly emetogenic
  - c. Administered with dexamethasone
  - d. Absence of severe renal impairment (eGFR less than 30 ml/min/1.73m<sup>2</sup>) or end state renal disease (ESRD)
  - e. Absence of severe hepatic impairment (Child-Pugh Class C)

### Emend oral suspension, Emend injection, and Focinvez injection



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### **Diagnosis**

Patient must have the following:

1. Prevention of acute or delayed nausea and vomiting
  - a. 6 months of age or older
  - b. Weight  $\geq$  6 kg
  - c. Undergoing chemotherapy for cancer
  - d. Used in combination with other antiemetic

### **Emend capsules**

#### **Diagnoses**

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

1. Prevention of acute or delayed nausea and vomiting
  - a. 12 years of age or older
  - b. Undergoing chemotherapy for cancer
  - c. Used in combination with other antiemetic
2. Postoperative nausea and vomiting (PONV)
  - a. 18 years of age or older

### **Cinvanti injection**

#### **Diagnosis**

Patient must have the following:

1. Prevention of acute or delayed nausea and vomiting
  - a. 18 years of age or older
  - b. Undergoing chemotherapy for cancer
  - c. Used in combination with other antiemetic

### **Varubi tablets**

#### **Diagnosis**

Patient must have the following:

1. Prevention of delayed nausea and vomiting
  - a. 18 years of age or older
  - b. Undergoing chemotherapy for cancer
  - c. Administered with dexamethasone and a 5-HT<sub>3</sub> receptor antagonist
  - d. Absence of severe hepatic impairment (Child-Pugh Class C)



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**Cinvanti injection, Emend capsules, Emend oral suspension (aprepitant)**

**Emend injection, Focinvez\* injection (fosaprepitant)**

**Varubi tablets (rolapitant)**

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## Prior - Approval Limits

### Quantity

#### Postoperative nausea and vomiting

Medication	Quantity Limit
Aprepitant 40 mg	5 capsules per 90 days

#### Acute or Delayed nausea and vomiting

Medication	Quantity Limit
Akynzeo 300 mg/0.5mg capsules	12 capsules per 90 days <b>OR</b>
Akynzeo 235 mg/0.25 mg injection	12 vials per 90 days <b>OR</b>
Cinvanti 130 mg injection	12 vials per 90 days <b>OR</b>
Emend 80 mg	48 capsules per 90 days <b>OR</b>
Emend 125 mg	12 capsules per 90 days <b>OR</b>
Emend Bi-pack (contains two 80 mg caps)	24 packs per 90 days <b>OR</b>
Emend Tri-pack (contains one 125 mg and two 80 mg)	12 packs per 90 days <b>OR</b>
Emend 125 mg suspension	18 kits per 90 days <b>OR</b>
Emend 150 mg injection	12 vials per 90 days <b>OR</b>
Focinvez 150 mg injection	12 vials per 90 days <b>OR</b>
Varubi 90 mg tablets	24 tablets per 90 days <b>OR</b>

**Duration** 12 months

## Prior – Approval *Renewal* Requirements

Same as above

## Prior - Approval *Renewal* Limits

Same as above