

Pre - PA Allowance

None

Prior-Approval Requirements

Age 18 years of age or older

Diagnoses

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

1. Recurrent epithelial ovarian, fallopian tube, or primary peritoneal cancers
 - a. Deleterious or suspected deleterious germline BRCA mutation, as determined by an FDA-approved test
 - b. Patient has had a complete or partial response to platinum-based chemotherapy
2. Advanced epithelial ovarian, fallopian tube, or primary peritoneal cancers
 - a. Patient has had a complete or partial response to first-line platinum-based chemotherapy

AND ALL of the following for **ALL** indications:

1. Prescriber agrees to obtain a complete blood count (CBC) at baseline, weekly for the first month, and monthly thereafter
2. Prescriber agrees to monitor for cardiovascular effects
3. Females of reproductive potential **only**: prescriber agrees to advise patient to use effective contraception during therapy and for 6 months after the last dose

Prior - Approval Limits

Quantity 300 mg per day

Duration 12 months

Prior – Approval *Renewal* Requirements

Age 18 years of age or older

Diagnoses

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

1. Recurrent epithelial ovarian, fallopian tube, or primary peritoneal cancers
2. Advanced epithelial ovarian, fallopian tube, or primary peritoneal cancers

AND ALL of the following for **ALL** indications:

1. Prescriber agrees to obtain complete blood counts (CBCs) as clinically indicated
2. Prescriber agrees to monitor for cardiovascular effects
3. **NO** disease progression or unacceptable toxicity
4. Females of reproductive potential **only**: prescriber agrees to advise patient to use effective contraception during therapy and for 6 months after the last dose

Prior – Approval *Renewal* Limits

Same as above