

Pre - PA Allowance

None

Prior-Approval Requirements

Age 18 years of age and older**Diagnoses**Patients must have **ONE** of the following:

1. Metastatic castration-resistant prostate cancer (CRPC) with **ONE** of the following:
 - a. Used in combination with prednisone
 - b. Used in combination with Lynparza and either prednisone or prednisolone
2. Metastatic high-risk castration-sensitive prostate cancer (CSPC)
 - a. Used in combination with prednisone
3. Non-metastatic very-high-risk prostate cancer
 - a. Used in combination with prednisone or methylprednisolone

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

- a. **NO** dual therapy with another androgen receptor inhibitor (see Appendix 1)
- b. Male patients with female partners of reproductive potential **only**: patient will be advised to use effective contraception during treatment with Zytiga and for 3 weeks after the final dose
- c. **Brand Zytiga only**: Patient **MUST** have tried the preferred product (generic Zytiga: abiraterone acetate) unless the patient has a valid medical exception (e.g., inadequate treatment response, intolerance, contraindication)

Prior - Approval Limits

Quantity

Strength	Quantity
250 mg	360 tablets per 90 days OR
500 mg	180 tablets per 90 days

Duration 12 months

ZYTIGA
(abiraterone acetate)**Prior – Approval *Renewal* Requirements**

Same as above

Prior - Approval *Renewal* Limits

Same as above

Appendix 1 - List of Androgen Receptor Inhibitors

Generic Name	Brand Name
abiraterone	Yonsa
abiraterone	Zytiga
abiraterone/niraparib	Akeega
apalutamide	Erleada
darolutamide	Nubeqa
enzalutamide	Xtandi
nilutamide	Nilandron