

Market Applicability															
Market	DC	FL & FHK	FL MMA	FL LTC	GA	KS	KY	LA	MD	NJ	NV	NY	TN	TX	WA
Applicable	X	X	NA	NA	X	NA	X	X	X	X	X	X	NA	NA	X

*FHK- Florida Healthy Kids

Jevtana (cabazitaxel)

CG-DRUG-80

Override(s)	Approval Duration
Prior Authorization	1 year

Medications
Jevtana (cabazitaxel) 60 mg/1.5mL intravenous solution for injection

APPROVAL CRITERIA

Requests for Jevtana (cabazitaxel) may be approved for the treatment of hormone-refractory metastatic prostate cancer (also known as castrate-resistant prostate cancer) when all of the following criteria are met:

- I. Cabazitaxel is used in combination with prednisone; **AND**
- II. Disease has progressed during or after treatment with a docetaxel-containing regimen; **AND**
- III. Individual's current Eastern Cooperative Oncology Group (ECOG) performance status is 0-2.

Requests for Jevtana (cabazitaxel) may **not** be approved when the above criteria are not met and for the treatment of all other solid tumors and uses, including but not limited to: appendiceal cancer, bladder cancer, brain tumor, breast cancer, head and neck cancer, lung cancer, melanoma and pancreatic cancer.

State Specific Mandates		
State name	Date effective	Mandate details (including specific bill if applicable)
N/A	N/A	N/A

Key References:

American Urological Association (AUA). Castration-Resistant Prostate Cancer. Amended 2015. Available at: [http://www.auanet.org/guidelines/castration-resistant-prostate-cancer-\(2013-amended-2015\)](http://www.auanet.org/guidelines/castration-resistant-prostate-cancer-(2013-amended-2015)). Accessed on August 24, 2017.

Basch E, Loblaw DA, Oliver TK, et al. Systemic therapy in men with metastatic castration-resistant prostate cancer: American Society of Clinical Oncology and Cancer Care Ontario clinical practice guideline. J Clin Oncol. 2014; 32(30):3436-3448.

Cabazitaxel. In: DrugPoints® System (electronic version). Truven Health Analytics. Greenwood Village, CO. Updated August 11, 2017. Available at: <http://www.micromedexsolutions.com>. Accessed on August 25, 2017.

Cabazitaxel Monograph. Lexicomp® Online, American Hospital Formulary Service® (AHFS®) Online, Hudson, Ohio, Lexi-Comp., Inc. Last revised March 8, 2017. Accessed on August 25, 2017.

This policy does not apply to health plans or member categories that do not have pharmacy benefits, nor does it apply to Medicare. Note that market specific restrictions or transition-of-care benefit limitations may apply.

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Market	DC	FL & FHK	FL MMA	FL LTC	GA	KS	KY	LA	MD	NJ	NV	NY	TN	TX	WA
Applicable	X	X	NA	NA	X	NA	X	X	X	X	X	X	NA	NA	X

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Jevtana® (cabazitaxel) [Product Information], Bridgewater, NJ. Sanofi-Aventis U.S. LLC. September 2016. Available at: <http://products.sanofi.us/jevtana/jevtana.html>. Accessed on August 25, 2017.

National Comprehensive Cancer Network®. NCCN Drugs & Biologic Compendium™ (electronic version). For additional information visit the NCCN website: <http://www.nccn.org>. Accessed on August 25, 2017.

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- Prostate Cancer (V.2.2017). Revised February 21, 2017

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