Alunbrig (brigatinib) is a non-preferred product and will only be considered for coverage under the pharmacy benefit when the following criteria are met:

Members must be clinically diagnosed with one of the following disease states and meet their individual criteria as stated.

**NON-SMALL CELL LUNG CANCER (NSCLC)**

For **initial** authorization:
1. Member must be 18 year of age or older; AND
2. Medication must be prescribed by oncologist/hematologist; AND
3. Member has anaplastic lymphoma kinase (ALK)-positive metastatic NSCLC and progression on or intolerance to crizotinib (Xalkori); AND
4. Member does not have a history of interstitial lung disease or drug-related pneumonitis; AND
5. Member did not receive crizotinib (Xalkori) within 3 days of the first dose of brigatinib (Alunbrig).
6. **Dosage allowed:** 90 mg orally once daily for the first 7 days; if tolerated, increase to 180 mg orally once daily.

*If member meets all the requirements listed above, the medication will be approved for 6 months.*

For **reauthorization**:
1. Member must be in compliance with all other initial criteria; AND
2. Chart notes have been provided that show the member has shown improvement of signs and symptoms of disease.

*If member meets all the reauthorization requirements above, the medication will be approved for an additional 6 months.*

CareSource considers Alunbrig (brigatinib) not medically necessary for the treatment of the diseases that are not listed in this document.

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<tr>
<th>DATE</th>
<th>ACTION/DESCRIPTION</th>
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<tr>
<td>06/23/2017</td>
<td>New policy for Alunbrig created.</td>
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References: