

SPECIALTY GUIDELINE MANAGEMENT

ZYTIGA (abiraterone)

POLICY

I. INDICATIONS

The indications below including FDA-approved indications and compendial uses are considered a covered benefit provided that all the approval criteria are met and the member has no exclusions to the prescribed therapy.

A. FDA-Approved Indication

Zytiga is indicated in combination with prednisone for the treatment of patients with metastatic castration-resistant prostate cancer.

All other indications are considered experimental/investigational and are not a covered benefit.

II. CRITERIA FOR INITIAL APPROVAL

Authorization of 24 months may be granted for the treatment of metastatic castration-resistant prostate cancer.

III. CONTINUATION OF THERAPY

All members (including new members) requesting authorization for continuation of therapy must meet all initial authorization criteria.

IV. REFERENCES

1. Zytiga [package insert]. Horsham, PA: Janssen Biotech, Inc.; May 2016.
2. The NCCN Drugs & Biologics Compendium™ © 2016 National Comprehensive Cancer Network, Inc. <http://www.nccn.org>. Accessed July 29, 2016.
3. National Comprehensive Cancer Network. NCCN Clinical Practice Guidelines in Oncology™ Prostate Cancer (Version 3.2016). <http://www.nccn.org>. Accessed July 29, 2016.