

Criteria-Based Consultation Prescribing Program

CRITERIA FOR DRUG COVERAGE

Belzutifan (Welireg)

Notes:

- Quantity Limits: Yes

Initiation (new start) criteria and criteria for current / new Kaiser Permanente members already taking the medication who have not been reviewed previously:

Non-formulary **belzutifan (Welireg)** will be covered on the prescription drug benefit when the following criteria are met:

- Patient is at least 18 years of age
- Prescribed by Oncology/Hematology
- Patient has a documented diagnosis of von Hippel-Lindau (VHL) disease -AND- any of the following clinical conditions:
 - VHL-associated renal cell carcinoma (RCC)
 - VHL-associated central nervous system (CNS) hemangioblastoma
 - VHL-associated pancreatic neuroendocrine tumors (pNET)
- Patient is not requiring immediate surgery