



STANDARD COMMERCIAL DRUG FORMULARY
PRIOR AUTHORIZATION GUIDELINES

CERITINIB

Generic	Brand	HICL	GCN	Medi-Span	Exception/Other
CERITINIB	ZYKADIA	41111		GPI-10 (2153051400)	

GUIDELINES FOR USE

1. Does the patient have a diagnosis of metastatic non-small cell lung cancer (NSCLC) **AND** meet the following criterion?

- The patient's tumor is anaplastic lymphoma kinase (ALK) positive, as detected by an FDA-approved test

If yes, **approve for 12 months by HICL or GPI-10 with a quantity limit of #3 per day.**

If no, do not approve.

DENIAL TEXT: *Some terms are already pre-defined in parenthesis. Please use these definitions if the particular text you need to use does not already have definition(s) in it.

Our guideline named **CERITINIB (Zykadia)** requires the following rule(s) be met for approval:

- A. You have a diagnosis of metastatic non-small cell lung cancer (type of lung cancer that has spread)
- B. Your tumor is anaplastic lymphoma kinase (ALK: a type of enzyme) positive as confirmed by a Food and Drug Administration-approved test

Your doctor told us **[INSERT PT SPECIFIC INFO PROVIDED]**. We do not have information showing you **[INSERT UNMET CRITERIA]**. This is why your request is denied. Please work with your doctor to use a different medication or get us more information if it will allow us to approve this request.

RATIONALE

For further information, please refer to the Prescribing Information and/or Drug Monograph for Zykadia.

REFERENCE

- Zykadia [Prescribing Information]. East Hanover, NJ: Novartis Pharmaceuticals Corporation; April 2019.

Library	Commercial	NSA
Yes	Yes	No

Part D Effective: N/A

Commercial Effective: 04/10/21

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P&T Approval: 01/19