



**STANDARD COMMERCIAL DRUG FORMULARY  
PRIOR AUTHORIZATION GUIDELINES**

**COBIMETINIB**

Generic	Brand	HICL	GCN	Exception/Other
COBIMETINIB FUMARATE	COTELLIC	42796		

**GUIDELINES FOR USE**

- Does the patient have a diagnosis of unresectable or metastatic melanoma and have **ALL** of the following criteria been met?
  - Positive for BRAF V600E **OR** V600K mutation
  - Cobimetinib will be used in combination with vemurafenib (Zelboraf)

If yes, **approve for 12 months by HICL with a quantity limit of #63 tablets per 28 days.**  
If no, do not approve.

**DENIAL TEXT:** Our guideline for **COBIMETINIB (Cotellic)** requires a diagnosis of unresectable or metastatic melanoma. In addition, all of the following criteria must be met:

- Positive for BRAF V600E **OR** V600K mutation, and
- Cobimetinib will be used in combination with vemurafenib (Zelboraf).

**RATIONALE**

To ensure appropriate use of Cotellic consistent with FDA approved indication.

**FDA APPROVED INDICATION**

Cotellic (cobimetinib) is a kinase inhibitor indicated for the treatment of patients with unresectable or metastatic melanoma with a BRAF V600E or V600K mutation, in combination with vemurafenib. Cotellic is not indicated for treatment of patients with wild-type BRAF melanoma.

**DOSAGE**

The recommended dose is 60 mg orally once daily for the first 21 days of each 28-day cycle until disease progression or unacceptable toxicity.

**AVAILABLE STRENGTHS:**

- 20 mg tablet

**REFERENCES**

- Cotellic [Prescribing Information]; San Francisco, CA: Genentech USA, Inc.; November 2015.

Library	Commercial	NSA
Yes	Yes	No

Part D Effective: N/A

Commercial Effective: 04/01/16

Created: 11/15

Client Approval: 02/16

P&T Approval: 02/16