

**Generic Name:** Tepotinib**Therapeutic Class or Brand Name:** Tepmetko®**Applicable Drugs (if Therapeutic Class):** N/A**Preferred:** N/A**Non-preferred:** N/A**Date of Origin:** 3/8/2021**Date Last Reviewed / Revised:** 11/8/2023

## PRIOR AUTHORIZATION CRITERIA

(MAY BE CONSIDERED MEDICALLY NECESSARY WHEN CRITERIA I - VI ARE MET)

- I. Documented diagnosis of metastatic non-small cell lung cancer (NSCLC).
- II. Presence of mesenchymal epithelial transition (MET) exon 14 skipping alteration.
- III. Age  $\geq$  18 years old.
- IV. Prescribed by or in consultation with an oncologist.
- V. Request is for a medication with the appropriate FDA labeling, or its use is supported by current clinical practice guidelines.
- VI. Refer to the plan document for the list of preferred products. If the requested agent is not listed as a preferred product, must have documented treatment failure or contraindication to the preferred product(s).

## EXCLUSION CRITERIA

- N/A

## OTHER CRITERIA

- Interstitial Lung Disease (ILD)/Pneumonitis: Immediately withhold Tepmetko in patients with suspected ILK/pneumonitis. Permanently discontinue Tepmetko in patients diagnosed with ILD/pneumonitis of any severity.
- Hepatotoxicity: Monitor liver function tests. Withhold, dose reduce, or permanently discontinue Tepmetko based on severity.
- Embryo-fetal toxicity: Tepmetko can cause fetal harm. Advise of potential risk to a fetus and use of effective contraception.

## QUANTITY / DAYS SUPPLY RESTRICTIONS

- 225 mg tablets: up to 60 tablets per 30 days.

## APPROVAL LENGTH

- **Authorization:** 1 year.

- **Re-Authorization:** 1 year, an updated letter of medical necessity or progress notes showing current medical necessity criteria are met and that the medication is effective.

## APPENDIX

- N/A

## REFERENCES

1. Tepmetko (tepotinib) [prescribing information]. Rockland, MA: EMD Serono Inc; March 2023. <https://www.emdserono.com/us-en/pi/tepmetko-pi.pdf>
2. National Comprehensive Cancer Network (NCCN) Guidelines Non-Small Cell Lung Cancer, Version 4.2023, updated October 18, 2023. Available at: [https://www.nccn.org/professionals/physician\\_gls/https://www.nccn.org/professionals/physician\\_gls/pdf/nscl\\_blocks.pdf](https://www.nccn.org/professionals/physician_gls/https://www.nccn.org/professionals/physician_gls/pdf/nscl_blocks.pdf)

**DISCLAIMER:** Medication Policies are developed to help ensure safe, effective and appropriate use of selected medications. They offer a guide to coverage and are not intended to dictate to providers how to practice medicine. Refer to Plan for individual adoption of specific Medication Policies. Providers are expected to exercise their medical judgement in providing the most appropriate care for their patients.