

Vizimpro (dacomitinib)
Effective 01/01/2024

Plan	<input type="checkbox"/> MassHealth UPPL <input checked="" type="checkbox"/> Commercial/Exchange	Program Type	<input checked="" type="checkbox"/> Prior Authorization <input checked="" type="checkbox"/> Quantity Limit <input type="checkbox"/> Step Therapy
Benefit	<input checked="" type="checkbox"/> Pharmacy Benefit <input type="checkbox"/> Medical Benefit		
Specialty Limitations	This medication has been designated specialty and must be filled at a contracted specialty pharmacy.		
Contact Information	Medical and Specialty Medications		
	All Plans	Phone: 877-519-1908	Fax: 855-540-3693
Contact Information	Non-Specialty Medications		
	All Plans	Phone: 800-711-4555	Fax: 844-403-1029
Exceptions	N/A		

Overview

FDA-Approved Indication

Vizimpro is indicated for the first-line treatment of patients with metastatic non-small cell lung cancer (NSCLC) with epidermal growth factor receptor (EGFR) exon 19 deletion or exon 21 L858R substitution mutations as detected by an FDA-approved test.

Compendial Uses

NSCLC, recurrent, advanced or metastatic sensitizing EGFR mutation-positive

All other indications are considered experimental/investigational and not medically necessary.

Coverage Guidelines

Authorization may be granted for members new to the plan who are currently receiving treatment with the requested medication, excluding when the product is obtained as samples or via manufacturer’s patient assistance programs.

OR

Authorization may be granted when the following criteria is met:

1. Submission of EGFR mutation testing results.
2. Treatment as a single agent when the member has sensitizing EGFR mutation-positive disease.

Continuation of Therapy

Authorization may be granted for continued treatment in members requesting reauthorization for EGFR positive NSCLC when either of the following criteria are met:

1. There is no evidence of unacceptable toxicity or disease progression while on the current regimen.
2. Disease is T790M negative and there is no evidence of unacceptable toxicity.

Limitations

Approvals will be granted for 12 months.

References

1. Vizimpro [package insert]. New York, NY: Pfizer, Inc.; December 2020.
2. The NCCN Drugs & Biologics Compendium 2022 National Comprehensive Cancer Network, Inc. <http://www.nccn.org>. Accessed March 4, 2022.
3. Wu YL, Cheng Y, Zhou X, et al. Dacomitinib versus gefitinib as first-line treatment for patients with *EGFR*-mutation-positive non-small-cell lung cancer (ARCHER 1050): a randomised, open-label, phase 3 trial. *Lancet Oncology*. 2017; 18:1454-66.

Review History

12/13/2023: Reviewed at Dec P&T, switched from SGM to Custom. Effective 1/1/2024

