

Jevtana (cabazitaxel)

PROGRAM RATIONALE

Client Requested: The intent of the criteria is to ensure that patients follow selection elements established by Clover Health for Jevtana.

CRITERIA FOR APPROVAL

1. What is the patient's diagnosis?

a. Metastatic castration-resistant prostate cancer → Other

2. Is the patient currently receiving therapy with the requested medication?

Yes

No

Continuation criteria

3. Is the patient receiving benefit from therapy with the requested medication as defined as no evidence of unacceptable toxicity and no evidence of disease progression while on the current regimen?

Yes

No

Initiation criteria

20. Was the patient previously treated with any of the following?

- Docetaxel-containing regimen
- Enzalutamide (Xtandi)
- Abiraterone (Zytiga)

Yes

No

21. Was the patient not a candidate for or intolerant to any of the following?

- Docetaxel-containing regimen
- Enzalutamide (Xtandi)
- Abiraterone (Zytiga)

Yes

No

SUMMARY OF EVIDENCE

1. Jevtana [package insert]. Bridgewater, NJ: Sanofi-Aventis U.S. LLC; February 2021.

EXPLANATION OF RATIONALE

Support for FDA-approved indications can be found in the manufacturer's prescribing information.

Reference number(s)
C22983-A

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