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5.21.037

Section:	Prescription Drugs	**Effective Date:**	October 1, 2024
Subsection:	Antineoplastic Agents	**Original Policy Date:**	June 19, 2013
Subject:	Tafinlar	**Page:**	1 of 8

Last Review Date: September 6, 2024

Tafinlar

Description

Tafinlar (dabrafenib)

Background
Tafinlar (dabrafenib) is an inhibitor of some mutated forms of BRAF kinases. Some mutations in the BRAF gene, including those that result in BRAF V600E, can result in constitutively activated BRAF kinases that may stimulate tumor cell growth. Tafinlar inhibits cell growth of carious BRAF V600 mutation-positive tumors. Tafinlar and trametinib (Mekinist) inhibit different kinases in the pathways involved in these tumors. Use of these two agents together results in greater growth inhibition of BRAF V600 mutation-positive tumor cell lines (1).

Regulatory Status
FDA-approved indications: Tafinlar is a kinase inhibitor indicated: (1)

1. As a single agent for the treatment of patients with unresectable or metastatic melanoma with BRAF V600E mutation as detected by an FDA-approved test.
2. In combination with trametinib (Mekinist) for the treatment of patients with unresectable or metastatic melanoma with BRAF V600E or V600K mutations as detected by an FDA-approved test.
3. In combination with trametinib (Mekinist) for the adjuvant treatment of patients with melanoma with BRAF V600E or V600K mutations, as detected by an FDA-approved test, and involvement of lymph node(s), following complete resection.
4. In combination with trametinib (Mekinist) for the treatment of patients with metastatic non-small cell lung cancer (NSCLC) with BRAF V600E mutation as detected by an FDA-approved test.

5. In combination with trametinib (Mekinist) for the treatment of patients with locally advanced or metastatic anaplastic thyroid cancer (ATC) with BRAF V600E mutation and with no satisfactory locoregional treatment options.
6. In combination with trametinib (Mekinist) for the treatment of adult and pediatric patients 1 year of age and older with unresectable or metastatic solid tumors with BRAF V600E mutation who have progressed following prior treatment and have no satisfactory alternative treatment options.
7. In combination with trametinib (Mekinist) for the treatment of pediatric patients 1 year of age and older with low-grade glioma (LGG) with a BRAF V600E mutation who require systemic therapy.

Limitations of Use: (1)
Tafinlar is not indicated for treatment of patients with colorectal cancer because of known intrinsic resistance to BRAF inhibition. Tafinlar is not indicated for the treatment of wild-type BRAF solid tumors.

Prior to initiation of therapy, the presence of BRAF V600E or V600K mutation in tumor specimens must be confirmed (1).

Hemorrhages, including major hemorrhages defined as symptomatic bleeding in a critical area or organ can occur in patients receiving Tafinlar. Permanently discontinue Tafinlar for all Grade 4 hemorrhagic events and for any Grade 3 hemorrhagic events that do not improve. Withhold Tafinlar for Grade 3 hemorrhagic events; if improved, resume at the next lower dose level (1).

Venous thromboembolism, such as deep vein thrombosis and pulmonary embolism, can occur in patients receiving Tafinlar (1).

Tafinlar has a risk of developing cardiomyopathy. Assess left ventricular ejection fraction (LVEF) by echocardiogram or multigated acquisition (MUGA) scan before initiation of Tafinlar, one month after initiation of Tafinlar, and then every 2 to 3 during treatment (1).

There is a risk of uveitis in patients treated with Tafinlar. Patients should be monitored for visual signs and symptoms of uveitis (1).

There is a potential risk of skin toxicity while taking Tafinlar. Patients should be monitored for new or worsening serious skin reactions (1).

There is a potential risk of hemolytic anemia in patients with glucose-6-phosphate dehydrogenase (G6PD) deficiency. Patients with G6PD deficiency should be monitored for signs of hemolytic anemia while taking Tafinlar (1).

Tafinlar can cause embryo-fetal toxicity and impaired fertility. Advise female patients of reproductive potential to use effective non-hormonal contraception during treatment with Tafinlar and for 2 weeks after the last dose (1).

The safety and effectiveness of Tafinlar in combination with trametinib (Mekinist) have not been established in pediatric patients less than 1 year old with unresectable or metastatic solid tumors and with LGG. The safety and effectiveness of Tafinlar for all other indications in pediatric patients have not been established (1).

Related Policies
Braftovi, Cotellic, Mekinist, Mektovi, Zelboraf

Policy

This policy statement applies to clinical review performed for pre-service (Prior Approval, Precertification, Advanced Benefit Determination, etc.) and/or post-service claims.

Tafinlar may be considered **medically necessary** if the conditions indicated below are met.

Tafinlar may be considered **investigational** for all other indications.

Prior-Approval Requirements

Diagnoses

Patient must have **ONE** of the following:

1. Unresectable or metastatic melanoma
    a. 18 years of age or older
    b. Patient has **ONE** of the following:
        i. Used as a single agent with documented BRAF V600E mutation as detected by an FDA-approved test

ii. Used in combination with trametinib (Mekinist) with documented BRAF V600E or BRAF V600K mutation as detected by an FDA-approved test

2. Resectable melanoma
   a. 18 years of age or older
   b. Used in combination with trametinib (Mekinist) with documented BRAF V600E or BRAF V600K mutation as detected by an FDA-approved test
   c. Melanoma has lymph node involvement
   d. Used as adjuvant treatment after complete resection

3. Metastatic non-small cell lung cancer (NSCLC)
   a. 18 years of age or older
   b. Used in combination with trametinib (Mekinist) with documented BRAF V600E mutation as detected by an FDA-approved test

4. Locally advanced or metastatic anaplastic thyroid cancer (ATC)
   a. 18 years of age or older
   b. Used in combination with trametinib (Mekinist) with documented BRAF V600E mutation
   c. **NO** satisfactory locoregional treatment options

5. Unresectable or metastatic solid tumors
   a. 1 year of age or older
   b. Used in combination with trametinib (Mekinist) with documented BRAF V600E mutation
   c. Patient has progressed following prior treatment
   d. **NO** satisfactory alternative treatment options

6. Low-grade glioma (LGG)
   a. 1 year of age or older
   b. Used in combination with trametinib (Mekinist) with documented BRAF V600E mutation
   c. Patient requires systemic therapy

AND the following for **ALL** indications:

a. Females of reproductive potential **only**: patient will be advised to use effective non-hormonal contraception during treatment with Tafinlar and for 2 weeks after the last dose

Prior – Approval *Renewal* Requirements

No renewal for resectable melanoma diagnosis

Diagnoses

Patient must have **ONE** of the following:

1. Unresectable or metastatic melanoma
    a. 18 years of age or older
    b. Used as a single agent **OR** used in combination with trametinib (Mekinist)

2. Metastatic non-small cell lung cancer (NSCLC)
    a. 18 years of age or older
    b. Used in combination with trametinib (Mekinist)

3. Locally advanced or metastatic anaplastic thyroid cancer (ATC)
    a. 18 years of age or older
    b. Used in combination with trametinib (Mekinist)

4. Unresectable or metastatic solid tumors
    a. 1 year of age or older
    b. Used in combination with trametinib (Mekinist)

5. Low-grade glioma (LGG)
    a. 1 year of age or older
    b. Used in combination with trametinib (Mekinist)

AND ALL of the following for **ALL** indications:

a. **NO** disease progression or unacceptable toxicity
b. Females of reproductive potential **only**: patient will be advised to use effective non-hormonal contraception during treatment with Tafinlar and for 2 weeks after the last dose

Policy Guidelines

Pre - PA Allowance

None

Prior - Approval Limits

Quantity

Strength	Quantity
10 mg	300 mg per day
50 mg	
75 mg	

Duration 12 months

Prior – Approval *Renewal* Limits

Same as above

No renewal for resectable melanoma diagnosis

Rationale

Summary

Tafinlar (dabrafenib) is indicated for the treatment of unresectable or metastatic melanoma; resectable melanoma; metastatic non-small cell lung cancer (NSCLC); locally advanced or metastatic anaplastic thyroid cancer (ATC); unresectable or metastatic solid tumors; and low-grade glioma (LGG). Tafinlar has several warnings including hemorrhage, cardiomyopathy, uveitis, serious skin toxicities, hemolytic anemia, and embryo-fetal toxicity (1-3).

Prior authorization is required to ensure the safe, clinically appropriate, and cost-effective use of Tafinlar while maintaining optimal therapeutic outcomes.

References

1. Tafinlar [package insert]. East Hanover, NJ: Novartis Pharmaceuticals Corporation; March 2024.
2. NCCN Drugs & Biologics Compendium® Dabrafenib 2024. National Comprehensive Cancer Network, Inc. Accessed on July 11, 2024.
3. NCCN Clinical Practice Guidelines in Oncology® Cutaneous Melanoma (Version 2.2024). National Comprehensive Cancer Network, Inc. April 2024. Accessed on July 11, 2024.
4. NCCN Clinical Practice Guidelines in Oncology® Non-Small Cell Lung Cancer (Version 7.2024). National Comprehensive Cancer Network, Inc. June 2024. Accessed on July 11, 2024.

Policy History

Date	Action
June 2013	New policy
September 2013	Annual editorial and reference update. Addition to criteria to allow combination therapy with Mekinist.
February 2014	Aligned criteria to new package insert. Addition of new warnings and precautions with the combined therapy with Mekinist.
June 2014	Annual editorial and reference update.
December 2014	Annual editorial and reference update. Removal of warnings and precautions with the combined therapy with Mekinist
June 2015	Annual review
March 2016	Annual editorial review and reference update Policy number change from 5.04.37 to 5.21.37
June 2016	Annual editorial review and reference update Addition of non-small cell lung cancer (NSCLC)
June 2017	Annual editorial review and reference update Rearranged the requirement of physician agrees to perform dermatologic evaluation prior to initiation, every 2 months while on therapy, and for up to 6 months following discontinuation of therapy and patient must **NOT** have wild-type BRAF melanoma -- put it under the melanoma indication only
June 2018	Annual review and reference update Addition of the diagnoses of resectable melanoma and locally advanced or metastatic anaplastic thyroid cancer to criteria Addition of quantity limits and combination with Mekinist requirements in renewal section
September 2018	Annual editorial review and reference update
June 2019	Annual review and reference update
June 2020	Annual review and reference update
December 2021	Annual editorial review and reference update
July 2022	Addition of indication: BRAF V600E mutation-positive unresectable or metastatic solid tumors. For consistency: removed requirement for melanoma to not have wild-type BRAF melanoma, removed requirement for dermatologic evaluation, and simplified or changed renewal requirements. Regulatory section was updated to remove off-label use section, as indications are now part of package insert
September 2022	Annual review and reference update
April 2023	Per PI update, added indication of low-grade glioma (LGG). Added 10 mg strength and changed PA limit to 300 mg per day of all strengths. Removed initiation requirement for an FDA-approved test for ATC indication

June 2023	Annual review and reference update
October 2023	Per PI update, lowered age requirement for unresectable or metastatic solid tumors from 6 years and older to 1 year and older
December 2023	Annual review and reference update
June 2024	Annual editorial review and reference update. Added contraception requirements per FEP
September 2024	Annual review and reference update

Keywords

This policy was approved by the FEP® Pharmacy and Medical Policy Committee on September 6, 2024 and is effective on October 1, 2024.