

**mobocertinib (EXKIVITY)**

**Diagnoses Considered for Coverage:**

- Non-small cell lung cancer (NSCLC)

**Coverage Criteria:**

**1. For diagnosis of Non-small cell lung cancer (NSCLC), approve if:**

- Disease is advanced, recurrent, or metastatic, **and**
- Provider attestation of the presence of the EGFR exon 20 insertion mutation, **and**
- Being used as subsequent therapy, **and**
- Being used as a single agent therapy, **and**
- Dose does not exceed 160 mg per day.

**Coverage Duration:** one year

Effective Date: 11/30/2022