

## MEKINIST (trametinib)

### Diagnosis Considered for Coverage:

- Anaplastic thyroid cancer (ATC)
- Cholangiocarcinoma
- CNS low-grade gliomas, pediatric diffuse high-grade gliomas, and glioblastoma
- Gallbladder cancer
- Gastrointestinal stromal tumor (GIST)
- Histiocytic neoplasms: Langerhans Cell Histiocytosis, Erdheim-Chester Disease, and Rosai-Dorfman
- Malignant melanoma
- Non-small cell lung cancer (NSCLC)
- Ovarian cancer, fallopian tube cancer, primary peritoneal cancer
- Salivary gland tumor
- Solid tumors
- Uveal melanoma

### Coverage Criteria:

#### For gastrointestinal stromal tumor (GIST):

- Being used for either of the following:
  - Gross residual disease (R2 resection), unresectable, tumor rupture or recurrent/metastatic disease, **or**
  - As neoadjuvant therapy**and**
- Presence of BRAF V600E gene mutation, **and**
- Being used in combination with Tafenlar, **and**
- Dose does not exceed 2 mg per day.

#### For salivary gland tumor:

- Being used for recurrent or metastatic disease, **and**
- Presence of BRAF V600E gene mutation, **and**
- Being used in combination with Tafenlar (dabrafenib), **and**
- Dose does not exceed 2 mg per day.

#### For anaplastic thyroid cancer:

- Being used for metastatic disease OR locally advanced (e.g. patient is not a candidate for a cure with surgical excision alone, or has recurrence after surgery, or disease is unresectable), **and**
- Provider attestation of positive BRAF gene V600E mutation, **and**

- Being used in combination with Tafenlar (dabrafenib), **and**
- Dose does not exceed 2 mg per day.

**For gallbladder cancer or cholangiocarcinoma:**

- Presence of BRAF V600E mutation, **and**
- Being used as subsequent treatment, **and**
- Being used in combination with Tafenlar (dabrafenib), **and**
- Dose does not exceed 2 mg per day.

**For CNS low-grade gliomas, pediatric diffuse high-grade gliomas, and glioblastoma:**

- Presence of BRAF V600E mutation, **and**
- Being used in combination with Tafenlar (dabrafenib), **and**
- Dose does not exceed 2 mg per day.

**For non-small cell lung cancer:**

- Being used for recurrent, advanced, metastatic disease, **and**
- Presence of BRAF V600E mutation, **and**
- Being used in combination with Tafenlar (dabrafenib), **and**
- Dose does not exceed 2 mg per day.

**For solid tumors, including advanced differentiated thyroid cancer (follicular, papillary, and Hurthle type):**

- Presence of BRAF V600E mutation, **and**
- Being used for unresectable, locally advanced, recurrent, or metastatic disease, **and**
- Being used in combination with Tafenlar (dabrafenib), **and**
- Being used as subsequent therapy, **and**
- Dose does not exceed 2 mg per day.

**For histiocytic neoplasms: Langerhans Cell Histiocytosis, Erdheim-Chester Disease, and Rosai-Dorfman:**

- Being used as single agent therapy, **and**
- Dose does not exceed 2 mg per day.

**For ovarian cancer/fallopian tube cancer/primary peritoneal cancer:**

- Persistent or recurrent disease, **and**
- Being used as single agent therapy, **and**
- Dose does not exceed 2 mg per day.

**For uveal melanoma:**

- Disease is unresectable or metastatic, **and**
- Being used as single agent therapy, **and**
- Dose does not exceed 2 mg per day.

**For malignant cutaneous melanoma:**

- Presence of BRAF V600 mutation (e.g., V600E or V600K), **and**
- Dose does not exceed 2 mg per day, **and**
- One of the following:
  - **For recurrent, unresectable, or metastatic disease and meets one of the following:**
    - Being used as single agent, or
    - Being used as a combination regimen with Tafinlar, or
    - Being used as a combination regimen with Tafinlar and Keytruda as subsequent or re-induction therapy.
  - OR
  - **For adjuvant treatment after resection:** Being used in combination with Tafinlar.

**Coverage Duration:** one year

Effective Date: 08/30/2023