

selpercatinib capsule (RETEVMO)

Diagnosis Considered for Coverage:

- RET fusion-positive non-small cell lung cancer (NSCLC) – advanced, metastatic
- RET-mutant medullary thyroid cancer (MTC) – advanced, metastatic
- RET fusion-positive thyroid cancer – advanced, metastatic
- RET fusion-positive solid tumors – advanced, metastatic
- Histiocytic neoplasms: Langerhans cell histiocytosis, Erdheim-Chester disease, and Rosai-Dorfman disease

COVERAGE CRITERIA:

For diagnosis of non-small cell lung cancer (NSCLC):

- Presence of RET rearrangement genetic alteration, **and**
- Being used as a single agent, **and**
- Dose does not exceed 320 mg per day.

For thyroid cancer:

MEDULLARY	<ul style="list-style-type: none"> • Being used for recurrent, refractory, unresectable, or metastatic disease, and • Presence of RET rearrangement genetic alteration, and • Dose does not exceed 320 mg per day.
PAPILLARY, HURTHLE, OR FOLLICULAR	<ul style="list-style-type: none"> • Being used for recurrent, refractory, unresectable, or metastatic disease, and • Presence of RET rearrangement genetic alteration, and • Patient's disease is refractory to radioactive iodine (RAI) therapy, OR patient has contraindication or intolerance to further RAI treatment, and • Dose does not exceed 320 mg per day.
ANAPLASTIC	<ul style="list-style-type: none"> • Being used for advanced, recurrent, refractory, or metastatic disease, and • Presence of RET rearrangement genetic alteration, • Being used as a single agent, and • Dose does not exceed 320 mg per day.

For soft tissue sarcoma (STS), approve if:

- Disease is retroperitoneal/intra-abdominal STS, extremity/body wall/head/neck STS, or pleomorphic rhabdomyosarcoma, and
- Disease is unresectable, advanced, or metastatic, and
- Presence of RET gene fusion, and
- Being used as a single agent, and
- Dose does not exceed 320 mg per day, and

For extremity/body wall/head/neck soft tissue sarcoma (STS), or pleomorphic rhabdomyosarcoma: Being used as first-line therapy.

For solid tumors:

- Presence of RET gene fusion, **and**
- Being used as a single agent, **and**
- One of the following:
 - Disease has progressed following prior treatment, or
 - There are no alternative treatment options,**and**
- Dose does not exceed 320 mg per day.

For histiocytic neoplasms: Langerhans cell histiocytosis, Erdheim-Chester disease, and Rosai-Dorfman disease:

- Presence of RET gene fusion mutation, **and**
- Being used as single agent therapy, **and**
- Dose does not exceed 320 mg per day.

Coverage Duration: one year

References:

1. Prescribing Information. Retevmo. Eli Lilly Inc. 2022
2. Retevmo. National Comprehensive Cancer Network (NCCN) Drugs & Biologics Compendium. 2022. Available by subscription at: www.nccn.org.

Effective Date: 08/30/2023