

entrectinib (ROZLYTREK)

**Diagnoses Considered for Coverage:**

- Non-small cell lung cancer (NSCLC) – advanced, recurrent, metastatic
- Neurotrophic receptor tyrosine kinase (NTRK) gene fusion-positive solid tumor
- Histiocytic neoplasms: Langerhans cell histiocytosis, Erdheim-Chester disease, and Rosai-Dorfman disease
- Cutaneous melanoma
- Glioblastoma

**Coverage Criteria:**

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

- Diagnosis of recurrent, advanced, or metastatic disease, **and**
- Presence of ROS1 or NTRK gene mutation, **and**
- Being used as a single agent, **and**
- Dose does not exceed 600 mg per day.

**For diagnosis of cutaneous melanoma:**

- Being used as a single agent, **and**
- Being used as second-line or subsequent therapy, **and**
- Presence of ROS1 or NTRK gene mutation, **and**
- Dose does not exceed 600 mg per day.

**For diagnosis of solid tumor:**

- Presence of NTRK gene fusion mutation, **and**
- Being used as single agent for solid tumor, **and**
- Dose does not exceed 600 mg per day.

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

- Presence of NTRK gene fusion mutation, **and**
- Being used as single agent therapy, **and**
- Dose does not exceed 600 mg per day.

**For diagnosis of glioblastoma:**

- Patient has recurrent or progressive disease, **and**
- Presence of NTRK gene-fusion mutation, **and**
- Being used as a single agent, **and**
- Dose does not exceed 600 mg per day.

Coverage Duration: one year

Effective Date: 02/28/2024