

Lutetium Lu 177 vipivotide tetraxetan (Pluvicto®)

**Place of Service**

Office Administration  
Infusion Center Administration  
Outpatient Facility Administration

HCP/CS: A9607 per 1 millicurie

**Condition(s) listed in policy (*see criteria for details*)**

- [Metastatic castration-resistant prostate cancer](#) (mCRPC)

**AHFS therapeutic class:** Antineoplastic agent

**Mechanism of action:** Radioligand therapeutic agent

**(1) Special Instructions and pertinent Information**

Covered under the Medical Benefit, please submit clinical information for prior authorization review.

**(2) Prior Authorization/Medical Review is required for the following condition(s)**

All requests for Pluvicto® (lutetium Lu 177 vipivotide tetraxetan) must be sent for clinical review and receive authorization prior to drug administration or claim payment.

**Metastatic castration-resistant prostate cancer (mCRPC)**

1. Disease is metastatic, **AND**
2. Prostate-specific membrane antigen (PSMA)-positive disease, **AND**
3. Previous treatment with androgen receptor (AR) pathway inhibition (e.g., Zytiga, Xtandi) and taxane-based chemotherapy

**Covered Doses**

Up to 7.4 GBq (200 mCi) IV every 6 weeks for up to 6 doses

**Coverage Period**

One year (total of six doses)

**ICD-10:**

C61

**(3) The following condition(s) DO NOT require Prior Authorization/Preservice**

All requests for Pluvicto® (lutetium Lu 177 vipivotide tetraxetan) must be sent for clinical review and receive authorization prior to drug administration or claim payment.

**(4) This Medication is NOT medically necessary for the following condition(s)**

Coverage for a Non-FDA approved indication, requires that criteria outlined in Health and Safety Code § 1367.21, including objective evidence of efficacy and safety are met for the proposed indication.

Please refer to the Provider Manual and User Guide for more information.

**(5) Additional Information**

How supplied:

1,000 MBq/mL (27 mCi/mL) in a single-dose vial

## **(6) References**

- AHFS®. Available by subscription at <http://www.lexi.com>
- DrugDex®. Available by subscription at <http://www.micromedexsolutions.com>
- Pluvicto® (lutetium Lu 177 vipivotide tetraxetan) [Prescribing Information]. Millburn, NJ: Advanced Accelerator Applications USA, Inc.; 10/2022.

## **(7) Policy Update**

Date of last review: 2Q2024

Date of next review: 2Q2025

Changes from previous policy version:

- No clinical change to policy following routine annual review.

*BSC Drug Coverage Criteria to Determine Medical Necessity  
Reviewed by P&T Committee*