

## fruquintinib (Fruzaqla®)

### Commercial Pharmacy Benefit Drug Policy

Limited Distribution Drug [click here for LDD drugs not available at CVS specialty](#)

### Drug Details

USP Category: ANTINEOPLASTICS

Mechanism of Action: VEGF-1,-2,and-3 kinase inhibitor

Label Name	Quantity Limit
Fruzaqla 1 MG CAP	84 caps/28 days
Fruzaqla 5 MG CAP	21 caps/28 days

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

- Colon, Rectal or Appendiceal Cancer

Any condition not listed in this policy requires a review to confirm it is medically necessary. For conditions that have not been approved for intended use by the Food and Drug Administration (i.e., off-label use), the criteria outlined in the Health and Safety Code section 1367.21 must be met.

### Special Instructions and pertinent Information

Provider must submit documentation (such as office chart notes, lab results or other clinical information) to ensure the member has met all medical necessity requirements.

The member's specific benefit may impact drug coverage. Other utilization management processes, and/or legal restrictions may take precedence over the application of this clinical criteria.

### The following condition(s) require Prior Authorization/Preservice:

#### Colon, Rectal or Appendiceal Cancer

1. Disease is advanced or metastatic, and
2. Being used as subsequent therapy following previous systemic treatment for advanced or metastatic disease, and
3. Being used as a single agent, and
4. Dose does not exceed FDA-approved maximum

#### Covered Doses:

Up to 5 mg daily for the first 21 days of each 28-day cycle

#### Coverage Period:

one year

### Additional Information

- The recommended dose of FRUZAQLA is 5 mg orally once daily for the first 21 days of each 28-day cycle until disease progression or unacceptable toxicity. Take FRUZAQLA with or without food at approximately the same time each day.
- Recommended Dose Reductions

Dose Level	Fruzaqla Dose
First dose reduction	4 mg orally once daily
Second dose reduction	3 mg orally once daily Permanently discontinue FRUZAQLA in patients unable to tolerate 3 mg orally once daily.

#### References

1. Fruzaqla. Prescribing information. Takeda Pharmaceuticals America, Inc. Lexington, MA. 02421. 11/2023
2. National Comprehensive Cancer Network (NCCN) Drugs & Biologics Compendium. 2023. Available by subscription at: [www.nccn.org](http://www.nccn.org).

#### Review History

- Date of Last Annual Review: 1Q2024  
 Date of last revision: 02/28/2024  
 Changes from previous policy version:
- new policy

*Blue Shield of California Medication Policy to Determine Medical Necessity  
 Reviewed by P&T Committee*