

## PRIOR AUTHORIZATION POLICY

- POLICY:** Oncology – Abiraterone Acetate Prior Authorization Policy
- Abiraterone Acetate (Zytiga® tablets – Janssen Biotech, generic)

**REVIEW DATE:** 12/14/2022

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### OVERVIEW

Abiraterone acetate, an androgen biosynthesis inhibitor, is indicated for following uses in combination with prednisone:<sup>1</sup>

- **Metastatic castration-resistant prostate cancer.**
- **Metastatic castration-sensitive prostate cancer, high-risk.**

### Guidelines

Abiraterone acetate is addressed in National Comprehensive Cancer Network (NCCN) prostate cancer guidelines (version 1.2023 – September 16, 2022) in a variety of clinical settings:

- For initial therapy for patients in the very-high-risk group, abiraterone acetate + prednisone + external beam radiation therapy (EBRT) and 2 years of androgen deprivation therapy (ADT) if the life expectancy is > 5 years or the patient is symptomatic is recommended (category 2A).
- For initial therapy for patients classified in the regional risk group (metastases in regional nodes [N1] with no distant metastases [M0]) and with a > 5 year expected patient survival or symptomatic, preferred therapy is EBRT + ADT + abiraterone acetate + prednisone (category 2A). ADT (without EBRT) ± abiraterone + prednisone is also recommended in this setting (category 2A). Abiraterone + ADT should be considered for a total of 2 years for those patients with N1 disease who are treated with radiation to the prostate and pelvic nodes. ADT in this setting includes orchiectomy, gonadotropin-releasing hormone (GnRH), or degarelix.
- For patients who are positive for distant metastasis (M1) and have castration-naïve disease, ADT + abiraterone + prednisone is a preferred recommendation (category 1).
- For patients with M0, prostate specific antigen (PSA) persistence or recurrence after radical prostatectomy with pelvic recurrence and life expectancy > 5 years, abiraterone + prednisone + ADT is recommended (category 2A). PSA persistence/recurrence after radical prostatectomy is defined as failure of PSA to fall to undetectable levels (PSA persistence) or undetectable PSA after radical prostatectomy with a subsequent detectable PSA that increases on 2 or more determinations (PSA recurrence) or that increases to PSA > 0.1 ng/mL.
- For patients who progress to castration-resistant prostate cancer and are positive for distant metastasis (M1) with no visceral metastases, abiraterone + prednisone is a preferred regimen (category 1) for patients who have not received prior novel hormone therapy (category 1). For patients who have received prior novel hormone therapy, abiraterone + prednisone is recommended (category 2A); abiraterone + dexamethasone is recommended in this setting for patients who have not received docetaxel if patients have had disease progression on either formulation of abiraterone (category 2A).

### POLICY STATEMENT

Prior Authorization is recommended for prescription benefit coverage of abiraterone acetate. All approvals are provided for the duration noted below.

**Automation:** None.

## RECOMMENDED AUTHORIZATION CRITERIA

Coverage of abiraterone acetate is recommended in those who meet one of the following criteria:

### FDA-Approved Indication

- 1. Prostate Cancer – Metastatic, Castration-Resistant.** Approve for 1 year if the patient meets the following conditions (A, B, and C):
  - A) Patient is  $\geq 18$  years of age; AND
  - B) The medication is used in combination with prednisone or dexamethasone; AND
  - C) Patient meets ONE of the following criteria (i, ii, or iii):
    - i. The medication is concurrently used with a gonadotropin-releasing hormone (GnRH) agonist;  
OR  
Note: Examples of GnRH agonists include: leuprolide acetate, Lupron Depot (leuprolide acetate intramuscular injection), Trelstar (triptorelin pamoate intramuscular injection), Zoladex (goserelin acetate subcutaneous implant), Vantas (histrelin acetate subcutaneous implant).
    - ii. The medication is concurrently used with Firmagon (degarelix subcutaneous injection); OR
    - iii. Patient has had a bilateral orchiectomy.
  
- 2. Prostate Cancer – Metastatic, Castration-Sensitive.** Approve for 1 year if the patient meets the following criteria (A, B, and C):
  - A) Patient is  $\geq 18$  years of age; AND
  - B) The medication is used in combination with prednisone; AND
  - C) Patient meets ONE of the following criteria (i, ii, or iii):
    - i. The medication is concurrently used with a gonadotropin-releasing hormone (GnRH) agonist  
OR  
Note: Examples of GnRH agonists include: leuprolide acetate, Lupron Depot (leuprolide acetate intramuscular injection), Trelstar (triptorelin pamoate intramuscular injection), Zoladex (goserelin acetate subcutaneous implant), Vantas (histrelin acetate subcutaneous implant).
    - ii. The medication is concurrently used with Firmagon (degarelix subcutaneous injection); OR
    - iii. Patient has had a bilateral orchiectomy.

### Other Uses with Supportive Evidence

- 3. Prostate Cancer – Radical Prostatectomy.** Approve for 1 year if the patient meets all of the following criteria (A, B, C, D, and E):
  - A) Patient is  $\geq 18$  years of age; AND
  - B) The medication is used in combination with prednisone; AND
  - C) Patient has prostate specific antigen (PSA) persistence or recurrence following radical prostatectomy; AND
  - D) Patient has pelvic recurrence; AND
  - E) Patient meets one of the following criteria (i, ii, or iii):
    - i. The medication is concurrently used with gonadotropin-releasing hormone (GnRH) agonist;  
OR  
Note: Examples of GnRH agonists include: leuprolide acetate, Lupron Depot (leuprolide acetate intramuscular injection), Trelstar (triptorelin pamoate intramuscular injection), Zoladex (goserelin acetate subcutaneous implant), Vantas (histrelin acetate subcutaneous implant).
    - ii. The medication is used in combination with Firmagon (degarelix subcutaneous injection); OR
    - iii. Patient has had a bilateral orchiectomy.

- 4. Prostate Cancer – Regional Risk Group.** Approve for 1 year if the patient meets all of the following criteria (A, B, C, and D):
- A) Patient is  $\geq 18$  years of age; AND
  - B) The medication is used in combination with prednisone; AND
  - C) Patient has regional lymph node metastases and no distant metastases; AND
  - D) Patient meets one of the following criteria (i, ii, or iii):
    - i. The medication is concurrently used with gonadotropin-releasing hormone (GnRH) agonist; OR  
Note: Examples of GnRH agonists include: leuprolide acetate, Lupron Depot (leuprolide acetate intramuscular injection), Trelstar (triptorelin pamoate intramuscular injection), Zoladex (goserelin acetate subcutaneous implant), Vantas (histrelin acetate subcutaneous implant).
    - ii. The medication is used in combination with Firmagon (degarelix subcutaneous injection); OR
    - iii. Patient has had a bilateral orchiectomy.
- 5. Prostate Cancer – Very-High-Risk Group.** Approve for 2 years (total) if the patient meets all of the following criteria (A, B, C, D, and E):
- A) Patient is  $\geq 18$  years of age; AND
  - B) The medication is used in combination with prednisone; AND
  - C) According the prescriber, the patient is in the very-high-risk group; AND  
Note: Very-high-risk group includes patients who have one of the following: primary Gleason pattern 5; 2 or 3 high-risk features;  $> 4$  cores with Grade Group 4 or 5; tumor that invades seminal vesicles; tumor that is fixed or invades adjacent structures other than seminal vesicles such as external sphincter, rectum, bladder, levator muscles, and/or pelvic wall.
  - D) The medication is used in combination with external beam radiation therapy; AND
  - E) Patient meets one of the following criteria (i, ii, or iii):
    - i. The medication is concurrently used with gonadotropin-releasing hormone (GnRH) agonist; OR  
Note: Examples of GnRH agonists include: leuprolide injection, Lupron Depot (leuprolide acetate intramuscular injection), Trelstar (triptorelin pamoate intramuscular injection), Zoladex (goserelin acetate subcutaneous implant), Vantas (histrelin acetate subcutaneous implant).
    - ii. The medication is used in combination with Firmagon (degarelix subcutaneous injection); OR
    - iii. Patient has had a bilateral orchiectomy.

#### CONDITIONS NOT RECOMMENDED FOR APPROVAL

Coverage of abiraterone acetate is not recommended in the following situations:

1. Coverage is not recommended for circumstances not listed in the Recommended Authorization Criteria. Criteria will be updated as new published data are available.

#### REFERENCES

1. Zytiga<sup>®</sup> tablets [prescribing information]. Horsham, PA: Janssen Biotech; August 2021.
2. The NCCN Prostate Cancer Clinical Practice Guidelines in Oncology (version 1.2023 – September 16, 2022). © 2022 National Comprehensive Cancer Network. Available at: <http://www.nccn.org>. Accessed December 12, 2022.
3. The NCCN Drugs and Biologics Compendium. © 2022 National Comprehensive Cancer Network. Available at: <http://www.nccn.org>. Accessed December 12, 2022. Search term: abiraterone acetate.