Market Applicability/Effective Date														
Market	**FL & FHK**	**FL MMA**	**FL LTC**	**GA**	**KS**	**KY**	**LA**	**MD**	**NJ**	**NV**	**NY**	**TN**	**TX**	**WA**
Applicable	X	NA	NA	X	NA	X	X	X	X	X	X	NA	NA	X

*FHK- Florida Healthy Kids

Medication	Comments
Taxotere (docetaxel)	N/A

OVERRIDE(S)
Prior Authorization of Benefits

APPROVAL DURATION
1 year

APPROVAL CRITERIA

Requests for docetaxel (Taxotere) **may be approved** for the treatment of any of the following indications:

I. Bladder cancer, recurrent or metastatic disease (includes Adenocarcinoma, Squamous Cell Carcinoma and Urothelial Carcinoma of the Bladder; Primary Carcinoma of the Urethra; Upper Genitourinary [GU] Tract Tumors; and Urothelial Carcinoma of the Prostate);
II. Bone cancer:
    a. Ewing's sarcoma; **OR**
    b. Osteosarcoma;
III. Breast cancer;
IV. Esophageal and esophagogastric junction cancers;
V. Gastric (stomach) adenocarcinoma;
VI. Head and neck cancer;
VII. Lung cancer (non-small cell lung cancer [NSCLC] and small cell lung cancer);
VIII. Occult primary tumors (cancer of unknown primary):
    a. Adenocarcinoma; **OR**
    b. Squamous cell carcinoma;
IX. Ovarian cancer:
    a. Epithelial ovarian cancer; **OR**
    b. Fallopian tube cancer; **OR**
    c. Primary peritoneal cancer;
X. Penile cancer;
XI. Prostate cancer;
XII. Soft tissue carcinoma;
XIII. Uterine neoplasms.

Docetaxel (Taxotere) **may not be approved** for all other indications.

Market Applicability/Effective Date														
Market	**FL & FHK**	**FL MMA**	**FL LTC**	**GA**	**KS**	**KY**	**LA**	**MD**	**NJ**	**NV**	**NY**	**TN**	**TX**	**WA**
Applicable	X	NA	NA	X	NA	X	X	X	X	X	X	NA	NA	X

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Note: Taxotere (docetaxel) has black box warnings for toxic deaths, hepatotoxicity, neutropenia, hypersensitivity reactions, and fluid retention. Treatment-related mortality increases in individuals with abnormal liver function, higher dose therapy, and NSCLC with a history of prior platinum-based treatment who receive Taxotere 100 mg/m2 as a single agent. Taxotere should not be given to individuals with bilirubin greater than the upper limit of normal (ULN), or to individuals with AST and/or ALT greater than 1.5 x ULN concomitant with alkaline phosphatase greater than 2.5 x ULN. These individuals are at increased risk for developing severe or life-threatening toxicities (such as grade 4 neutropenia, febrile neutropenia, infections, severe thrombocytopenia, severe stomatitis, severe skin toxicity, and toxic death). Bilirubin, AST or ALT, and alkaline phosphatase should be obtained prior to each therapy cycle. Taxotere should not be given to individuals with neutrophil counts of less than 1500 cells/mm3. Frequent blood counts should be performed to monitor for neutropenia. Severe hypersensitivity reactions, including fatal anaphylaxis, have been reported in individuals who received premedication with dexamethasone. Use is contraindicated in individuals with a severe hypersensitivity to docetaxel or polysorbate 80. Severe fluid retention may occur despite use of dexamethasone premedication.