Access Services by Bayer™

for VITRAKVI® (larotrectinib)

PHONE

1-800-288-8374

Anytime between 8:00 AM–8:00 PM ET, Monday–Friday

Call Access Services by Bayer for:

- Program questions • Co-pay questions
- Information for additional financial support

FAX

1-800-390-1826

VISIT

VITRAKVI-US.com

Information provided in this resource is for informational purposes only and does not guarantee that codes will be appropriate or that coverage and reimbursement will result. Customers should consult their payers for all relevant coverage, coding, and reimbursement requirements. It is the sole responsibility of the provider to select proper codes and ensure the accuracy of all claims used in seeking reimbursement. Neither this resource nor Access Services by Bayer™ is intended as legal advice or as a substitute for a provider's independent professional judgment.

Please see Important Safety Information on pages 3 to 4, and click here for full Prescribing Information.

VITRAKVI® (larotrectinib) 25-mg/100-mg CAPSULES 20-mg/mL ORAL SOLUTION

VITRAKVI® (larotrectinib) Sample Letter of Medical Necessity

Access Services by Bayer™

[DATE]

[NAME OF CONTACT AT PAYER]
[PAYER COMPANY NAME]
[ADDRESS]

Insured: [NAME OF INSURED]
Patient: [NAME OF PATIENT (if different)]
Patient Date of Birth: [MM/DD/YYYY]
Policy Number: [NUMBER]
Group Number: [NUMBER]

Dear [NAME OF CONTACT AT PAYER],

I am writing on behalf of my patient, [NAME OF PATIENT], to request that [PAYER COMPANY NAME] approve coverage for VITRAKVI®. VITRAKVI is indicated for the treatment of adult and pediatric patients with solid tumors that:

- have a neurotrophic receptor tyrosine kinase (*NTRK*) gene fusion without a known acquired resistance mutation,
- are metastatic or where surgical resection is likely to result in severe morbidity, and
- have no satisfactory alternative treatments or that have progressed following treatment.

Select patients for therapy based on an FDA-approved test.

This indication is approved under accelerated approval based on overall response rate and duration of response. Continued approval for this indication may be contingent upon verification and description of clinical benefit in confirmatory trials. This letter documents the medical necessity for the use of VITRAKVI by my patient and provides information about [NAME OF PATIENT]'s medical history and treatment, *NTRK* gene fusion diagnostic test results, and a copy of the VITRAKVI Prescribing Information.

[NAME OF PATIENT] is [a/an] [AGE]-year-old [male/female] with a diagnosis of [PATIENT DIAGNOSIS] as of [DATE OF DIAGNOSIS]. [NAME OF PATIENT] has been in my care for [PATIENT DIAGNOSIS] since [DATE]. [Provide a brief discussion of the patient's relevant medical history, condition/symptoms, *NTRK* gene fusion diagnostic test results, and therapy to date, including other treatments attempted and results].

Based on the above information, VITRAKVI is indicated and medically necessary for [NAME OF PATIENT]'s treatment. If you have any questions, please contact me at [PHYSICIAN TELEPHONE NUMBER]. Thank you in advance for your immediate attention to this request.

Sincerely,

[PHYSICIAN NAME]
[PRACTICE NAME]

Attachments: [original claim form, copy of denial or explanation of benefits (if applicable), copy of patient's insurance card, VITRAKVI Prescribing Information, FDA approval letter, larotrectinib primary publication, etc.]

Please see additional Important Safety Information on page 4, and click here for full Prescribing Information.

VITRAKVI® (larotrectinib) 25-mg/100-mg CAPSULES 20-mg/mL ORAL SOLUTION

INDICATION AND IMPORTANT SAFETY INFORMATION

INDICATION

VITRAKVI is indicated for the treatment of adult and pediatric patients with solid tumors that:

- have a neurotrophic receptor tyrosine kinase *(NTRK)* gene fusion without a known acquired resistance mutation,
- are metastatic or where surgical resection is likely to result in severe morbidity, and
- have no satisfactory alternative treatments or that have progressed following treatment.

Select patients for therapy based on an FDA-approved test.

IMPORTANT SAFETY INFORMATION

Warnings and Precautions

- **Central Nervous System Effects:** Central nervous system (CNS) adverse reactions occurred in patients receiving VITRAKVI, including dizziness, cognitive impairment, mood disorders, and sleep disturbances.

  In patients who received VITRAKVI, all grades CNS effects including cognitive impairment, mood disorders, dizziness and sleep disorders were observed in 40.3% with Grades 3-4 in 3.8% of patients.

  Cognitive impairment occurred in 11% of patients. The median time to onset of cognitive impairment was 6 months (range: 2 days to 56 months). Cognitive impairment occurring in ≥ 1% of patients included memory impairment (4.1%), disturbance in attention (3.6%), confusional state (2.3%), cognitive disorder (1.6%), delirium (1.4%), and hallucination (1.1%). Grade 3 cognitive adverse reactions occurred in 1.8% of patients and Grade 4 cognitive adverse reactions in 0.2% of patients. Among the 49 patients with cognitive impairment, 6% required a dose modification and 18% required dose interruption.

  Mood disorders occurred in 14% of patients. The median time to onset of mood disorders was 3.3 months (range: 1 day to 65 months). Mood disorders occurring in ≥1% of patients included anxiety (5%), agitation (3.2%), depression (3.2%), irritability (2.3%), and restlessness (1.1%). Grade 3 mood disorders occurred in 0.9% of patients. Among the 63 patients who experienced mood disorders, no patient required a dose modification, and 1.6% required dose interruption.

  Dizziness occurred in 22% of patients, and Grade 3 dizziness occurred in 0.9% of patients. Among the 96 patients who experienced dizziness, 6% of patients required a dose modification and 5% required dose interruption.

  Sleep disturbances occurred in 12% of patients. Sleep disturbances included insomnia (9%), somnolence (3.4%), and sleep disorder (0.5%). Grade 3 sleep disturbances occurred in 0.2% of patients. Among the 54 patients who experienced sleep disturbances, no patient required a dose modification and 3.7% required dose interruption.

  Advise patients and caretakers of these risks with VITRAKVI. Advise patients not to drive or operate hazardous machinery if they are experiencing neurologic adverse reactions. Withhold or permanently discontinue VITRAKVI based on the severity. If withheld, modify the VITRAKVI dosage when resumed.

- **Skeletal Fractures:** Skeletal fractures can occur in patients taking VITRAKVI.

  Among 444 patients who received VITRAKVI across clinical trials, fractures occurred in 7% of patients; 6% of 290 adult patients and 10% of 154 pediatric patients. Median time to first fracture was 13 months (range 27 days to 73 months) in patients followed per fracture. The most common fractures were of the rib (1.4%), fibula, foot or wrist (0.7% each). Most fractures were associated with minimal or moderate trauma. Some fractures were associated with radiologic abnormalities suggestive of local tumor involvement. VITRAKVI treatment was interrupted due to fracture in 1.4% patients.

  Promptly evaluate patients with signs or symptoms of potential fracture (e.g., pain, changes in mobility, deformity). There are no data on the effects of VITRAKVI on healing of known fractures or risk of future fractures.

Please see additional Important Safety Information on page 4, and click here for full Prescribing Information.

VITRAKVI® (larotrectinib) 25-mg/100-mg CAPSULES 20-mg/mL ORAL SOLUTION

IMPORTANT SAFETY INFORMATION (continued)

- **Hepatotoxicity:** Hepatotoxicity including drug induced liver injury (DILI) has occurred in patients taking VITRAKVI. In patients who received VITRAKVI (n=444), increased AST of any grade occurred in 62% of patients and increased ALT of any grade occurred in 61%. Grade 3-4 increased AST or ALT occurred in 7% and 8% of patients, respectively. The median time to onset of increased AST was 1.9 months (range: 4 days to 3.8 years). The median time to onset of increased ALT was 1.9 months (range: 1 day to 4.9 years). Increased AST and ALT leading to dose modifications occurred in 1.6% and 3.2% of patients, respectively. Increased AST or ALT led to permanent discontinuation in 4 (0.9%) patients.

  There have been reports from clinical studies and postmarketing cases of Grade ≥ 2 increases in ALT and/or AST with increases in bilirubin ≥ 2 x ULN.

  Obtain liver function tests (ALT, AST, ALP and bilirubin) before initiation of VITRAKVI and monitor every 2 weeks during the first 2 months of treatment, then monthly thereafter, or more frequently following the occurrence of Grade 2 or greater AST or ALT elevation. Temporarily withhold, reduce the dose, or permanently discontinue VITRAKVI based on severity.
- **Embryo-Fetal Toxicity:** VITRAKVI can cause fetal harm when administered to a pregnant woman. Larotrectinib resulted in malformations in rats and rabbits at maternal exposures that were approximately 11- and 0.7-times, respectively, those observed at the clinical dose of 100 mg twice daily. Advise women of the potential risk to a fetus. Advise females of reproductive potential to use an effective method of contraception during treatment and for 1 week after the last dose of VITRAKVI.

Adverse Reactions

- The most common adverse reactions (≥20%), including laboratory abnormalities, were: increased AST (62%), increased ALT (61%), anemia (45%), hypoalbuminemia (44%), musculoskeletal pain (41%), increased alkaline phosphatase (40%), leukopenia (37%), lymphopenia (35%), neutropenia (34%), hypocalcemia (32%), fatigue (31%), vomiting (30%), cough (29%), constipation (27%), pyrexia (26%), diarrhea (26%), nausea (25%), abdominal pain (24%), dizziness (22%), and rash (21%).

Drug Interactions

- Avoid coadministration of VITRAKVI with strong CYP3A4 inhibitors (including grapefruit or grapefruit juice), strong CYP3A4 inducers (including St. John's wort), or sensitive CYP3A4 substrates. If coadministration of strong CYP3A4 inhibitors or inducers cannot be avoided, modify the VITRAKVI dose as recommended. If coadministration of sensitive CYP3A4 substrates cannot be avoided, monitor patients for increased adverse reactions of these drugs. For coadministration with moderate CYP3A4 inhibitors, monitor for adverse reactions more frequently and reduce the dosage based on severity. For coadministration with moderate CYP3A4 inducers, modify dose as recommended.

Use in Specific Populations

- Lactation: Advise women not to breastfeed during treatment with VITRAKVI and for 1 week after the last dose.

Please click here for full Prescribing Information.

© 2025 Bayer. All rights reserved. Bayer, the Bayer Cross, and VITRAKVI are registered trademarks of Bayer, and Access Services by Bayer is a trademark of Bayer. MAC-VIT-US-0293-1 04/25

VITRAKVI® (larotrectinib) 25-mg/100-mg CAPSULES 20-mg/mL ORAL SOLUTION