for COTELLIC® and ZELBORAF®
(cobimetinib) (vemurafenib)

**SAMPLE CODING FOR COTELLIC**

<table>
<thead>
<tr>
<th>Malignant Melanoma</th>
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<tr>
<td><strong>TYPE</strong></td>
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<tr>
<td>Diagnosis: ICD-10-CM</td>
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<tr>
<td>Drug: NDC</td>
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<tr>
<td>Note: Payer requirements regarding use of a 10-digit or 11-digit NDC may vary. Both formats are listed here for your reference.</td>
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ICD-10-CM=International Classification of Diseases, 10th Revision, Clinical Modification; NDC=National Drug Code.

*This range of codes does not include melanoma in situ (D03.-), malignant melanoma of the skin of genital organs (C51–52, C60.-, C63.2), Merkel cell carcinoma (C4A.-), vermillion border of the lip (C00.0–C00.2), malignant neoplasm of the anus (C21.0), malignant neoplasm of scrotum (C63.2); plus, for melanoma of sites other than the skin (not previously specified), code to the malignant neoplasm of that site.

These codes are not all-inclusive; appropriate codes can vary by patient, setting of care and payer. Correct coding is the responsibility of the provider submitting the claim for the item or service. Please check with the payer to verify codes and special billing requirements. Genentech does not make any representation or guarantee concerning reimbursement or coverage for any service or item.

Many payers will not accept unspecified codes. If you use an unspecified code, please check with your payer.

**INDICATION & IMPORTANT SAFETY INFORMATION**

**Indications and Usage**

COTELLIC (cobimetinib) is indicated for the treatment of patients with unresectable or metastatic melanoma with a BRAF V600E or V600K mutation, in combination with ZELBORAF (vemurafenib).

**Important Safety Information**

**WARNINGS AND PRECAUTIONS**

Review the Full Prescribing Information for ZELBORAF for information on the serious risks of ZELBORAF.

The following can occur in patients treated with COTELLIC:

- New primary malignancies, including cutaneous and non-cutaneous malignancies
- Hemorrhage, including major hemorrhages
- Cardiomyopathy, defined as symptomatic and asymptomatic decline in left ventricular ejection fraction
- Severe dermatologic reactions, including rash and other skin reactions
- Serous retinopathy and retinal vein occlusion
- Hepatotoxicity
- Rhabdomyolysis
- Severe photosensitivity
- Embryo-fetal toxicity

The following can occur in patients treated with ZELBORAF:

- New primary malignancies including cutaneous squamous cell carcinoma, non-cutaneous squamous cell carcinoma, new primary melanoma, and other malignancies
- Tumor promotion in BRAF wild-type melanomas
- Serious hypersensitivity reactions including anaphylaxis

Please see the full Prescribing Information, including BOXED WARNING, for additional Important Safety Information.
Important Safety Information (cont)

WARNINGS AND PRECAUTIONS (cont)

• Severe dermatologic reactions including Stevens-Johnson syndrome and toxic epidermal necrolysis
• QT prolongation
• Hepatotoxicity including liver injury leading to functional hepatic impairment (including coagulopathy or other organ dysfunction); increases in transaminases and bilirubin when concurrently administered with ipilimumab
• Photosensitivity
• Ophthalmologic reactions, including uveitis, blurry vision, and photophobia
• Embryo-fetal toxicity
• Radiation sensitization and radiation recall, including fatal cases in patients with visceral involvement
• Renal failure, including acute interstitial nephritis and acute tubular necrosis
• Dupuytren's contracture and plantar fascial fibromatosis

USE IN SPECIFIC POPULATIONS: Lactation

Advise women not to breastfeed during treatment with COTELLIC and ZELBORAF and for 2 weeks after the final dose of COTELLIC or ZELBORAF (whichever is taken later).

DRUG INTERACTIONS

• Avoid concomitant administration of COTELLIC with strong or moderate CYP3A inducers or inhibitors.
• Avoid concurrent use of ZELBORAF with strong CYP3A4 inhibitors, strong CYP3A4 inducers, and CYP1A2 and P-glycoprotein substrates with narrow therapeutic windows.

Most Common Adverse Reactions

The most common (≥20%) adverse reactions with COTELLIC were diarrhea (60%), photosensitivity reaction (46%), nausea (41%), pyrexia (28%), and vomiting (24%). The most common (≥5%) Grade 3-4 laboratory abnormalities were increased GGT (21%), increased CPK (14%), hypophosphatemia (12%), increased ALT (11%), lymphopenia (10%), increased AST (8%), increased alkaline phosphatase (7%), and hyponatremia (6%).

You may report side effects to the FDA at (800) FDA-1088 or www.fda.gov/medwatch. You may also report side effects to Genentech at (888) 835-2555.

Please see both Full COTELLIC Prescribing Information and Full ZELBORAF Prescribing Information for additional Important Safety Information.