

# Criteria-Based Consultation Prescribing Program

## CRITERIA FOR DRUG COVERAGE

### Nirogacestat (Ogsiveo)

#### Notes:

- Quantity Limits: Yes
- ^ Adequate trial is defined as 8 weeks treatment duration
- \* Intolerance excludes adverse drug reactions that are expected, mild in nature, resolve with continued treatment, and do not require medication discontinuation

**Initiation (new start) criteria:** Formulary **nirogacestat (Ogsiveo)** will be covered on the prescription drug benefit when the following criteria are met:

- Prescribed by a hematologist or oncologist
- Presence of desmoid tumor
- Patient has failed an adequate trial<sup>^</sup> of sorafenib or patient has an allergy or intolerance\* to sorafenib  
-OR-
- Relative contraindication to sorafenib defined as any of the following:
  - Long QT syndrome
  - Baseline QTc greater than or equal to 500 msec
  - Congestive heart failure NYHA Class III or IV or with LVEF < 50%
  - Myocardial infarction or unstable angina within the past 6 months

**Criteria for current Kaiser Permanente members already taking the medication who have not been reviewed previously:** Formulary **nirogacestat (Ogsiveo)** will be covered on the prescription drug benefit when the following criteria are met:

- Prescribed by a hematologist or oncologist
- Presence of desmoid tumor

**Criteria for new members entering Kaiser Permanente already taking the medication who have not been reviewed previously:** Formulary **nirogacestat (Ogsiveo)** will be covered on the prescription drug benefit when the following criteria are met:

- Prescribed by a hematologist or oncologist
- Presence of desmoid tumor