STANDARD COMMERCIAL DRUG FORMULARY
PRIOR AUTHORIZATION GUIDELINES

PACRITINIB

Generic	Brand	HICL	GCN	Medi-Span	Exception/Other
PACRITINIB CITRATE	VONJO	47850		GPI-10 (2153755010)	

GUIDELINES FOR USE

INITIAL CRITERIA (NOTE: FOR RENEWAL CRITERIA SEE BELOW)

1. Does the patient have a diagnosis of intermediate- or high-risk primary or secondary (post-polycythemia vera or post-essential thrombocytopenia) myelofibrosis and meet **ALL** of the following criteria?
   - The patient is 18 years of age or older
   - The patient has a platelet count below 50,000/uL

   If yes, **approve for 6 months by HICL or GPI-10 with a quantity limit of #4 per day.**
   If no, do no approve.
   INITIAL DENIAL TEXT: ***Some terms are already pre-defined in parenthesis. Please use these definitions if the particular text you need to use does not already have definition(s) in it.**

   Our guideline named **PACRITINIB (Vonjo)** requires the following rule(s) be met for approval:
   A. You have intermediate- or high-risk primary or secondary (post-polycythemia vera [type of blood cell disorder] or post-essential thrombocythemia [type of blood cell disorder]) myelofibrosis (type of bone marrow cancer)
   B. You are 18 years of age or older
   C. You have a platelet count below 50,000/uL

   Your doctor told us [INSERT PT SPECIFIC INFO PROVIDED]. We do not have information showing you [INSERT UNMET CRITERIA]. This is why your request is denied. Please work with your doctor to use a different medication or get us more information if it will allow us to approve this request.

RENEWAL CRITERIA

1. Does the patient have a diagnosis of intermediate- or high-risk primary or secondary (post-polycythemia vera or post-essential thrombocythemia) myelofibrosis (MF)?

   If yes, continue to #2.
   If no, do not approve.
   DENIAL TEXT: See the renewal denial text at the end of the guideline.

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PACRITINIB

RENEWAL CRITERIA (CONTINUED)

2. Has the patient shown symptom improvement by meeting **ONE** of the following criteria?
   - The patient has a spleen volume reduction of 35% or greater from baseline
   - The patient has a 50% or greater reduction in total symptom score (e.g., Myeloproliferative Neoplasm Symptom Assessment Form [MPN-SAF TSS], modified Myelofibrosis Symptom Assessment Form [MFSAF] v2.0)
   - The patient has a 50% or greater reduction in palpable spleen length

   If yes, **approve for 12 months by HICL or GPI-10 with a quantity limit of #4 per day.**
   If no, do not approve.
   RENEWAL DENIAL TEXT: *Some terms are already pre-defined in parenthesis. Please use these definitions if the particular text you need to use does not already have definition(s) in it.

   Our guideline named **PACRITINIB (Vonjo)**requires the following rule(s) be met for renewal:
   A. You have intermediate- or high-risk primary or secondary (post-polycythemia vera [type of blood cell disorder] or post-essential thrombocythemia [type of blood cell disorder]) myelofibrosis (type of bone marrow cancer)
   B. You have shown symptom improvement by meeting ONE of the following:
      1. You have a spleen volume reduction of 35% or greater from baseline
      2. You have a 50% or greater reduction in total symptom score (such as Myeloproliferative Neoplasm Symptom Assessment Form [MPN-SAF TSS], modified Myelofibrosis Symptom Assessment Form [MFSAF] v2.0)
      3. You have a 50% or greater reduction in palpable (can be felt by external examination) spleen length

   Your doctor told us [INSERT PT SPECIFIC INFO PROVIDED]. We do not have information showing you [INSERT UNMET CRITERIA]. This is why your request is denied. Please work with your doctor to use a different medication or get us more information if it will allow us to approve this request.

RATIONALE

For further information, please refer to the Prescribing Information and/or Drug Monograph for Vonjo.

REFERENCES

- Vonjo [Prescribing Information]. Seattle, WA: CTI BioPharma Corp.; February 2022.

Library	Commercial	NSA
Yes	Yes	No

Part D Effective: N/A
Commercial Effective: 04/01/22
Created: 03/22
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P&T Approval: 10/21