

Pre - PA Allowance

None

Prior-Approval Require

Age 18 years of age and older

Diagnoses

Patient must have **ONE** of the following:

1. T315I-positive Philadelphia chromosome positive acute lymphoblastic leukemia (Ph+ ALL)
 - a. Used as monotherapy
2. Philadelphia chromosome positive acute lymphoblastic leukemia (Ph+ ALL)
 - a. No other tyrosine kinase (TKI) therapy is indicated
 - b. Used as monotherapy
3. Newly-diagnosed Philadelphia chromosome positive acute lymphoblastic leukemia (Ph+ ALL)
 - a. Used in combination with chemotherapy
4. T315I-positive chronic myeloid leukemia (CML)
 - a. At least 6 months prior to request for treatment
5. Chronic phase (CP) chronic myeloid leukemia (CML)
 - a. Resistant or intolerant to at least two prior tyrosine kinase inhibitors
6. Accelerated phase (AP) or blast phase (BP) chronic myeloid leukemia (CML)
 - a. No other tyrosine kinase (TKI) therapy is indicated

AND ALL of the following:

- a. Prescriber agrees to monitor for evidence of thromboembolism and vascular occlusion
- b. Cardiac function will be monitored
- c. Hepatic function will be monitored
- d. Complete blood count will be monitored
- e. Females of reproductive potential **only**: patient will be advised to use effective contraception during treatment with Iclusig and for 3 weeks after the final dose

Prior - Approval Limits

Quantity 45 mg per day

Duration 12 months

Prior – Approval *Renewal* Requirements

Age 18 years of age and older

Diagnoses

Patient must have **ONE** of the following:

1. T315I-positive Philadelphia chromosome positive acute lymphoblastic leukemia (Ph+ ALL)
 - a. Used as monotherapy
2. Philadelphia chromosome positive acute lymphoblastic leukemia (Ph+ ALL)
 - a. No other tyrosine kinase (TKI) therapy is indicated
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3. Philadelphia chromosome positive acute lymphoblastic leukemia (Ph+ ALL)
 - a. Used in combination with chemotherapy
4. T315I-positive chronic myeloid leukemia (CML)
5. Chronic phase (CP) chronic myeloid leukemia (CML)
 - a. Resistant or intolerant to at least two prior tyrosine kinase inhibitors
6. Accelerated phase (AP) or blast phase (BP) chronic myeloid leukemia (CML)
 - a. No other tyrosine kinase (TKI) therapy is indicated

AND NONE of the following:

- a. Thromboembolic events or vascular occlusions while being treated with Iclusig
- b. Heart failure while being treated with Iclusig
- c. Hepatotoxicity while being treated with Iclusig

AND ALL of the following:

- a. Complete blood count will be monitored



**BlueCross
BlueShield**

Federal Employee Program.

ICLUSIG
(ponatinib)

- b. Females of reproductive potential **only**: patient will be advised to use effective contraception during treatment with Iclusig and for 3 weeks after the final dose

Prior - Approval *Renewal* Limits

Same as above