

**SARCLISA**  
**(isatuximab-irfc)**

## **Pre - PA Allowance**

None

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## **Prior-Approval Requirements**

**Age** 18 years of age and older

### **Diagnoses**

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

1. Multiple myeloma (MM)
  - a. Used in combination with pomalidomide and dexamethasone
  - b. Patient has received at least two prior therapies including the following:
    - i. Proteasome inhibitor (PI)
    - ii. Lenalidomide (Revlimid)
2. Relapsed or refractory multiple myeloma (MM)
  - a. Used in combination with carfilzomib and dexamethasone
  - b. Patient has received one to three prior lines of therapy
3. Newly diagnosed multiple myeloma (MM)
  - a. Used in combination with bortezomib, lenalidomide, and dexamethasone
  - b. Patient is not eligible for autologous stem cell transplant (ASCT)

**AND ALL** of the following for **ALL** diagnoses:

1. Prescriber agrees to monitor complete blood counts (CBC)
2. Females of reproductive potential **only**: patient will be advised to use effective contraception during treatment with Sarclisa and for 5 months after the final dose

## **Prior - Approval Limits**

**Duration** 12 months

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## **Prior – Approval *Renewal* Requirements**



**BlueCross  
BlueShield**

Federal Employee Program.

**SARCLISA  
(isatuximab-irfc)**

**Age** 18 years of age and older

**Diagnosis**

Patient must have the following:

Multiple myeloma (MM)

**AND ALL** of the following:

1. **NO** disease progression or unacceptable toxicity
2. Prescriber agrees to monitor complete blood counts (CBC)
3. Females of reproductive potential **only**: patient will be advised to use effective contraception during treatment with Sarclisa and for 5 months after the final dose

**Prior - Approval *Renewal* Limits**

Same as above