

Specialty Guideline Management

Gomekli

Products Referenced by this Document

Drugs that are listed in the following table include both brand and generic and all dosage forms and strengths unless otherwise stated. Over-the-counter (OTC) products are not included unless otherwise stated.

Brand Name	Generic Name
Gomekli	mirdametinib

Indications

FDA-approved Indications

Gomekli is indicated for the treatment of adult and pediatric patients 2 years of age and older with neurofibromatosis type 1 (NF1) who have symptomatic plexiform neurofibromas (PN) not amenable to complete resection.

Coverage Criteria

Neurofibromatosis type 1¹

Authorization of 12 months may be granted for treatment of neurofibromatosis type 1 (NF1) when the member has symptomatic plexiform neurofibromas (PN) not amenable to complete resection.

Reference number(s)
6835-A

Continuation of Therapy

Authorization of 12 months may be granted for continued treatment in members requesting reauthorization for an indication listed in the Coverage Criteria section when there is no evidence of unacceptable toxicity or disease progression while on the current regimen.

References

1. Gomekli [package insert]. Stamford, CT: SpringWorks Therapeutics, Inc.; February 2025.