

Criteria-Based Consultation Prescribing Program

CRITERIA FOR DRUG COVERAGE

pirtobrutinib (Jaypirca)

Notes:

- Quantity Limits: Yes

Initiation (new start) criteria: Non-formulary **pirtobrutinib (Jaypirca)** will be covered on the prescription drug benefit when the following criteria are met:

- Prescribed by Oncologist or Hematologist
- Patient is greater than or equal to 18 years of age
- Patient has a diagnosis of advance CLL/SLL and failed an adequate trial or has a contraindication or intolerance to 2 therapies, which included at least ONE BTK inhibitor (ibrutinib, acalabrutinib, Zanubrutinib) and Venetoclax.
 - -OR-
- Patient has a diagnosis of MCL and failed an adequate trial or has a contraindication or intolerance to at least ONE BTK inhibitor (ibrutinib, acalabrutinib, Zanubrutinib) OR Venetoclax.

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

- Prescribed by Oncologist or Hematologist
- Patient is greater than or equal to 18 years of age
- Patient has a diagnosis of CLL/SLL or MCL

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

- Prescribed by Oncologist or Hematologist
- Patient is greater than or equal to 18 years of age
- Patient has a diagnosis of CLL/SLL or MCL