

# Criteria-Based Consultation Prescribing Program

## CRITERIA FOR DRUG COVERAGE

### Momelotinib (Ojjaara)

#### Notes:

- Quantity Limits: Yes
- ^ Adequate trial is defined as 90-day treatment duration
- \* Intolerance excludes adverse drug reactions that are expected, mild in nature, resolve with continued treatment, and do not require medication discontinuation

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

- Patient is 18 years or older
- Patient has a diagnosis of intermediate or high-risk primary myelofibrosis **-OR-** secondary myelofibrosis (post-polycythemia vera or post-essential thrombocythemia)
- Patient failed adequate trial of ruxolitinib **-OR-** patient has allergy or intolerance to ruxolitinib **-AND-** baseline hemoglobin less than 10 g/dL

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

- Patient is 18 years or older
- Patient has a diagnosis of intermediate or high-risk primary myelofibrosis **-OR-** secondary myelofibrosis (post-polycythemia vera or post-essential thrombocythemia)

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

- Patient is 18 years or older
- Patient has a diagnosis of intermediate or high-risk primary myelofibrosis **-OR-** secondary myelofibrosis (post-polycythemia vera or post-essential thrombocythemia)