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| Division: Pharmacy Policy | Subject: Prior Authorization Criteria |
| Original Development Date: Original Effective Date: Revision Date: | December 14, 2012 November 23, 2015 |

SYNRIBO® (omacetaxine mepesuccinate)

LENGTH OF AUTHORIZATION: 90 days

REVIEW CRITERIA:

- Patient must be ≥ 18 years old.
- Must have current history of chronic myeloid leukemia (CML) in chronic phase or accelerated phase that can be verified by progress notes, discharge notes, health conditions, or medication claims history.
- Patient must have failed therapy with at least two tyrosine kinase inhibitors (TKIs):

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| Tyrosine Kinase Inhibitors used for the treatment of CML |
| Bosulif (bosutinib) |
| Gleevec (imatinib) |
| Sprycel (dasatinib) |
| Tasigna (nilotinib) |
| Iclusig (ponatinib) |

DOSING & ADMINISTRATION:

- Induction Dose: 1.25 mg/m^2 administered by subcutaneous injection twice daily for 14 consecutive days of a 28-day cycle.
- Maintenance Dose: 1.25 mg/m^2 administered by subcutaneous injection twice daily for 7 consecutive days of a 28-day cycle.