



Drug/Drug Class:	Besremi Clinical Edit
First Implementation Date:	October 20, 2022
Revised Date:	November 2, 2023
Prepared for:	MO HealthNet
Prepared by:	MO HealthNet/Conduent
Criteria Status:	⊠Existing Criteria □Revision of Existing Criteria □New Criteria

Executive Summary

Purpose: Ensure appropriate utilization and control of Besremi® (ropeginterferon alfa-2b-njft).

Why Issue Selected:

Besremi® (ropeginterferon alfa-2b-njft) was FDA approved on November 12, 2021 for the treatment of adult patients with polycythemia vera. Polycythemia vera is the most common of the chronic myeloproliferative neoplasms (MPNs) and differs from the other MPNs by the presence of an elevated red blood cell mass (erythrocytosis). Serious complications of polycythemia vera include increased risk of blood clots and disease transformation into myelofibrosis or acute myeloid leukemia. Polycythemia vera may occur in any patient population or any age, however the median age at diagnosis is 60 years. Prevalence is estimated at 44 to 57 per 100,000 people in the United States.

Besremi belongs to the class of type 1 interferons, which exhibit their cellular effect in polycythemia vera in the bone marrow. After binding to the interferon alfa receptor (IFNAR), Besremi initiates a downstream signaling cascade that reduces blood cell production. It is the first FDA-approved agent for polycythemia vera that can be utilized regardless of treatment history.

Due to the high cost and specific approved indications, MO HealthNet will impose clinical criteria to ensure appropriate utilization of Besremi.

Program-Specific Information:

Drug	Cost per unit (MAC)	Cost per month (MAC)	Cost per year (MAC)
BESREMI 500 MCG/ML SYRINGE	\$7,476.97	\$14,953.94	\$194,401.22

Type of Criteria: ☐ Increased risk of ADE ☐ Preferred Drug List

Data Sources: ☐ Only Administrative Databases ☐ Databases + Prescriber-Supplied

Setting & Population

- Drug class for review: Besremi (ropeginterferon alfa-2b-njft)
- Age range: All appropriate MO HealthNet participants aged 18 years and older

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Approval Criteria

Initial Therapy:

- Documented diagnosis of polycythemia vera AND
- Prescribed by or in consultation with a hematologist, oncologist, or other specialist in the treated disease state AND
- Participant aged ≥ 18 years AND
- Participant considered to be high-risk based on:
 - Age > 60 years **OR**
 - o Age ≤ 60 years and thrombosis history **AND**
- Participant history demonstrates therapeutic trial of peginterferon alfa-2a (defined as 84/112 days) AND
- Participant has resistance or intolerance to hydroxyurea therapy defined by:
 - Need for phlebotomy to keep hematocrit < 45% after 3 months of at least 2 g/day of hydroxyurea OR
 - Platelet count > 400 x 10⁹/L and white blood cell count > 10 x 10⁹/L after 3 months of at least 2 g/day of hydroxyurea OR
 - o Reduction of splenomegaly < 50% after 3 months of at least 2 g/day of hydroxyurea **OR**
 - Absolute neutrophil count < 1.0 x 10⁹/L or platelet count < 100 x 10⁹/L or hemoglobin < 10 g/dL OR
 - Documentation of previous therapeutic trial (at least 3 months of therapy) or concurrent treatment, intolerance, insufficient response, or contraindication with hydroxyurea.
- Initial approval for 6 months

Continuation of Therapy:

- Participant demonstrates compliance to prescribed therapeutic regimen (defined as 84/112 days)
- Continued approval for 1 year

Denial Criteria

- Therapy will be denied if all approval criteria are not met
- Participant has existence of, or history of severe psychiatric disorders, particularly severe depression, suicidal ideation, or suicide attempt
- Participant has history of moderate to severe hepatic impairment (Child-Pugh B and C)
- Participant has history of Chronic Kidney Disasese Stage 4 or 5 or End-Stage Renal Disease
- Participant is currently pregnant

Required Documentation						
Laboratory Results: MedWatch Form:		Progress Notes: Other:	X			
Disposition of Edit						
Denial: Exception code "0682" (Clinical Edit) Rule Type: CE						

Default Approval Period

6 months

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