

<b>Clinical Policy Title:</b>	pomalidomide
<b>Policy Number:</b>	RxA.858
<b>Drug(s) Applied:</b>	Pomalyst®
<b>Original Policy Date:</b>	10/11/2024
<b>Last Review Date:</b>	12/11/2025
<b>Line of Business Policy Applies to:</b>	All lines of business (except Medicare)

## Criteria

### I. Initial Approval Criteria

#### A. Multiple Myeloma (must meet all):

1. Diagnosis of multiple myeloma;
2. Prescribed in combination with dexamethasone;
3. Trial and failure of both the following (a and b):
  - a. lenalidomide;
  - b. Proteasome inhibitor.

#### Approval Duration

**All Lines of Business (except Medicare):** 12 months

#### B. Kaposi Sarcoma (must meet all):

1. Diagnosis of Kaposi Sarcoma;
2. Patient is HIV negative; OR
3. If disease is AIDS-related, Pomalyst® is prescribed after failure of antiretroviral therapy (HAART).

#### Approval Duration

**All Lines of Business (except Medicare):** 12 months

### II. Continued Therapy Approval

#### A. All Indications in Section I (must meet all):

1. Auto-approval based on lookback functionality within the past 120 days as a proxy for member responding positively to therapy.

#### Approval Duration

**All Lines of Business (except Medicare):** 12 months

## References

1. Pomalyst Prescribing Information. Princeton, NJ: Bristol-Myers Squibb Company; March 2023. Available at [https://packageinserts.bms.com/pi/pi\\_pomalyst.pdf](https://packageinserts.bms.com/pi/pi_pomalyst.pdf). Accessed February 2, 2024.

Review/Revision History	Review/Revision Date	P&T Approval Date
Policy established.	10/11/2024	12/05/2024
Policy was reviewed	12/11/2025	12/11/2025

This clinical policy has been developed to authorize, modify, or determine coverage for individuals with similar conditions. Specific care and treatment may vary depending on individual need and benefits covered by the plan. This policy is not intended to dictate to providers how to practice medicine, nor does it constitute a contract or guarantee regarding payment or results. This document may contain prescription brand name drugs that are trademarks of pharmaceutical manufacturers that are not affiliated with RxAdvance.