Market Applicability							
Market	**DC**	**GA**	**KY**	**MD**	**NJ**	**NY**	**WA**
Applicable	X	X	X	X	X	X	NA

Ultomiris (ravulizumab-cwvz)

Override(s)	Approval Duration
Prior Authorization	1 year except as noted within the criteria below

Medications	Quantity Limit
Ultomiris (ravulizumab-cwvz) 300 mg/30 mL vial*	12 vials per 56 days

*Initiation of therapy: May approve 10 (ten) additional vials (300 mg/mL) in the first 28 days (4 weeks) of treatment.

APPROVAL CRITERIA

Requests for initiation of therapy with Ultomiris (ravulizumab-cwvz) in paroxysmal nocturnal hemoglobinuria (PNH) may be approved if the following criteria are met:

I. Individual has PNH as documented by flow cytometry, including the presence of (Parker 2005):
   A. PNH type III red cells clone or a measurable granulocyte or monocyte clone; **OR**
   B. Glycosylphosphatidylinositol-anchored proteins (GPI-AP)-deficient polymorphonuclear cells (PMNs);

AND

II. Individual has been immunized with a meningococcal vaccine at least 2 weeks prior to administration of the first dose of Ultomiris (ravulizumab-cwvz), unless the clinical record documents the risks of delaying Ultomiris (ravulizumab-cwvz) outweigh the risk of meningococcal infection;

AND

III. Individual has no evidence of an active meningococcal infection;

AND

IV. Individual has (Lee 2018):
   A. Lactate dehydrogenase greater than 1.5 times the upper limit of normal; **OR**
   B. One or more PNH-related sign or symptom (such as but not limited to anemia or history of major adverse vascular event from thromboembolism).

Market Applicability							
Market	**DC**	**GA**	**KY**	**MD**	**NJ**	**NY**	**WA**
Applicable	X	X	X	X	X	X	NA

Initial Approval Duration: 6 months

Requests for continued use of Ultomiris (ravulizumab-cwvz) in PNH may be approved if the following criteria are met:

I. Individual has experienced a clinical response as shown by one of the following:
   A. Stabilization of hemoglobin levels; **OR**
   B. Reduction in number of transfusions required; **OR**
   C. Improvement in hemolysis (for example, normalization or decrease of LDH levels).

Requests for initiation of therapy with Ultomiris (ravulizumab-cwvz) in atypical hemolytic uremic syndrome (aHUS) may be approved if the following criteria are met:

I. Individual has a diagnosis of aHUS; **AND**
II. The diagnosis of aHUS is supported by the absence of Shiga toxin-producing E. coli infection; **AND**
III. Thrombotic thrombocytopenic purpura has been ruled out [for example, normal ADAMTS 13 activity and no evidence of an ADAMTS 13 inhibitor (Loirat 2011, 2016)], or if thrombotic thrombocytopenic purpura cannot be ruled out by laboratory and clinical evaluation, a trial of plasma exchange did not result in clinical improvement; **AND**
IV. Individual has been immunized with a meningococcal vaccine at least 2 weeks prior to administration of the first dose of Ultomiris (ravulizumab-cwvz), unless the clinical record documents the risks of delaying Ultomiris (ravulizumab-cwvz) outweigh the risk of meningococcal infection; **AND**
V. Individual has no evidence of an active meningococcal infection.

Initial Approval Duration: 6 months

Requests for continued use of Ultomiris (ravulizumab-cwvz) in aHUS may be approved if the following criteria are met:

I. There is clinical improvement after the initial trial (for example, increased platelet count or laboratory evidence of reduced hemolysis) until an individual becomes a candidate for physician-directed cessation as evidenced by the following (Merrill 2017):
   A. Complete clinical remission has been achieved (that is, resolution of thrombocytopenia and mechanical hemolysis, and normalization or new baseline plateau of renal function) and improvement of precipitating illness is clinically apparent; **AND**

Market Applicability							
Market	**DC**	**GA**	**KY**	**MD**	**NJ**	**NY**	**WA**
Applicable	X	X	X	X	X	X	NA

B. Duration of clinical remission has been stable for 2 months.

Requests for resumption of Ultomiris (ravulizumab-cwvz) in aHUS may be approved if the following criteria are met (Fakhouri 2017):

I. Individual experienced a relapse after discontinuation of therapy as defined by:
   A. Reduction in platelet count to less than 150,000/mm3 or greater than 25% from baseline; **OR**
   B. Mechanical hemolysis (having 2 or more features of hemoglobin less than 10 g/dL, lactate dehydrogenase greater than 2 times upper limit of normal, undetectable haptoglobin, or presence of schistocytes on smear); **OR**
   C. Acute kidney injury with serum creatinine increase greater than 15% from baseline levels.

Requests for Ultomiris (ravulizumab-cwvz) may not be approved if the above criteria are not met and for all other indications.

Note:
Ultomiris (ravulizumab-cwvz) has a black box warnings for serious meningococcal infections. Life-threatening and fatal meningococcal infections have occurred in patients treated with Ultomiris (ravulizumab-cwvz) and meningococcal infection may become rapidly life-threating or fatal if not recognized and treated early. Individuals should be immunized with meningococcal vaccines at least 2 weeks prior to initiation of therapy unless the risks of delaying therapy outweigh the risk of developing a meningococcal infection. The FDA has required the manufacturer to develop comprehensive risk management programs that includes the enrollment of prescribers in the Ultomiris REMS Program. Additional information and forms for individuals, prescribers, and pharmacists may be found on the manufacturer's websites: http://www.ultomirisrems.com.

State Specific Mandates		
State name N/A	Date effective N/A	Mandate details (including specific bill if applicable) N/A

Key References:

Market Applicability							
Market	**DC**	**GA**	**KY**	**MD**	**NJ**	**NY**	**WA**
Applicable	X	X	X	X	X	X	NA

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