

Poteligeo (mogamulizumab-kpkc)
Effective 08/01/2020

Plan	<input type="checkbox"/> MassHealth UPPL <input checked="" type="checkbox"/> Commercial/Exchange	Program Type	<input checked="" type="checkbox"/> Prior Authorization <input type="checkbox"/> Quantity Limit <input type="checkbox"/> Step Therapy
Benefit	<input type="checkbox"/> Pharmacy Benefit <input checked="" type="checkbox"/> Medical Benefit		
Specialty Limitations	N/A		
Contact Information	Medical and Specialty Medications		
	All Plans	Phone: 877-519-1908	Fax: 855-540-3693
Exceptions	Non-Specialty Medications		
	All Plans	Phone: 800-711-4555	Fax: 844-403-1029

Overview

Mogamulizumab is a first-in-class defucosylated, humanized IgG1 kappa monoclonal antibody which selectively binds to C-C chemokine receptor 4 (CCR4). CCR4 mediates cell trafficking of lymphocytes to skin and various organs and is consistently expressed on the surface of T-cell malignancies. Binding to CCR4 targets a cell for antibody-dependent cellular cytotoxicity (ADCC), resulting in target cell depletion. Mogamulizumab is indicated for treatment of relapsed or refractory mycosis fungoides (MF) and relapsed or refractory Sézary syndrome (SS) in adult patients.

All other indications are considered experimental/investigational and are not a covered benefit.

Coverage Guidelines

Authorization may be granted for members who are currently receiving treatment with Poteligeo, excluding when the product is obtained as samples or via manufacturer's patient assistance programs

Or

Authorization may be granted when all the following criteria are met, and clinical documentation has been submitted:

1. Member is diagnosed with relapsed or refractory mycosis fungoides or Sézary syndrome
2. Prescriber is an oncologist or hematologist AND
3. Member has received at least one prior systemic therapy (see Appendix), which resulted in an inadequate response.
4. Dosing is appropriate based on member's current weight.

Limitations

Approvals will be granted for 12 months.

Appendix

First-line systemic therapies for mycosis fungoides or Sézary syndrome

1. Extracorporeal phototherapy

2. Oral retinoids (bexarotene, tretinoin capsules, isotretinoin capsules)
3. Interferons (Pegasys/Intron-A)
4. HDAC inhibitors (vorinostat, romidepsin)
5. Methotrexate or pralatrexate
6. Adcetris (brentuximab)
7. Cyclophosphamide

References

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4. Avilés A, Nambo MJ, Neri N, et al. Interferon and low dose methotrexate improve outcome in refractory mycosis fungoides/Sézary syndrome. *Cancer Biother Radiopharm* 2007; 22:836Iclusig (ponatinib) [prescribing information]. Cambridge, MA: Ariad Pharmaceuticals Inc; October 2018
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6. Scarisbrick JJ, Child FJ, Clift A, et al. A trial of fludarabine and cyclophosphamide combination chemotherapy in the treatment of advanced refractory primary cutaneous T-cell lymphoma. *Br J Dermatol* 2001; 144:1010
7. Horwitz SM, Kim YH, Foss F, et al. Identification of an active, well-tolerated dose of pralatrexate in patients with relapsed or refractory cutaneous T-cell lymphoma. *Blood* 2012; 119:4115.
8. Burg G, Dummer R. Historical perspective on the use of retinoids in cutaneous T-cell lymphoma (CTCL). *Clin Lymphoma* 2000; 1 Suppl 1:S41
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Review History

04/17/2019 – Reviewed

05/20/2020 – Reviewed and Updated May P&T; updated overview; added started and stabilized statement.

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