

Chemokine Receptor Type 4 (CXCR4) Inhibitors
Aphexda (motixafortide)
07/01/2025

Plan	<input checked="" type="checkbox"/> MassHealth UPPL <input type="checkbox"/> Commercial/Exchange	Program Type	<input checked="" type="checkbox"/> Prior Authorization
Benefit	<input type="checkbox"/> Pharmacy Benefit <input checked="" type="checkbox"/> Medical Benefit		<input type="checkbox"/> Quantity Limit <input type="checkbox"/> Step Therapy
Specialty Limitations	N/A		
Contact Information	Medical and Specialty Medications		
	All Plans	Phone: 877-519-1908	Fax: 855-540-3693
Contact Information	Non-Specialty Medications		
	All Plans	Phone: 800-711-4555	Fax: 844-403-1029
Notes	Additional agents from this class are available through the pharmacy benefit. Please see the MassHealth Drug List for coverage and criteria.		

Overview

Aphexda (motixafortide) is indicated in combination with filgrastim (G-CSF) to mobilize hematopoietic stem cells to the peripheral blood for collection and subsequent autologous transplantation in patients with multiple myeloma.

Coverage Guidelines

Authorization may be granted for members when all the following criteria are met:

1. Diagnosis of multiple myeloma (MM) requiring autologous hematopoietic cell transplantation (HCT)
2. Prescriber is an oncologist or hematologist or consult notes from an oncologist or hematologist are provided
3. Requested agent will be used in combination with a granulocyte colony stimulating factor (G-CSF)
4. Clinical rationale for use of the requested agent instead of plerixafor
5. Appropriate dosing

Continuation of Therapy

Requests for recertification in members who have received one dose and require an additional dose can be approved for an additional 3 months.

Requests for recertification for greater than two total doses will require documentation of medical necessity and will be reviewed on a case-by-case basis.

Limitations

1. Initial approvals will be granted for **3 months**.
2. Reauthorizations (see details in Continuation of Therapy)
 - a. Requests for additional dose may be granted for an additional **3 months**.
 - b. Requests for greater than two total doses will be reviewed on a **case-by-case basis**.

References

1. Laubach JP, Multiple myeloma: Clinical features, laboratory manifestations, and diagnosis. In: Rajkumar SV (Ed). UpToDate [database on the internet]. Waltham (MA): UpToDate; 2010 [cited 2023 Nov 02]. Available from: https://www.uptodate.com/contents/multiple-myeloma-clinical-features-laboratory-manifestations-anddiagnosis?search=multiple%20myeloma&source=search_result&selectedTitle=2%7E150&usage_type=default&display_rank=2
2. Laubach JP, Multiple myeloma: Overview of management. In: Rajkumar SV (Ed). UpToDate [database on the internet]. Waltham (MA): UpToDate; 2010 [cited 2024 March 5]. Available from: https://www.uptodate.com/contents/multiple-myeloma-overview-ofmanagement?search=multiple%20myeloma&source=search_result&selectedTitle=3%7E150&usage_type=default&display_rank=3
3. Kumar S, Multiple myeloma: Use of hematopoietic cell transplantation, In: Rajkumar SV (Ed). UpToDate [database on the internet]. Waltham (MA): UpToDate; 2010 [cited 2024 March 5]. Available from: https://www.uptodate.com/contents/multiple-myeloma-use-of-hematopoietic-celltransplantation?search=multiple%20myeloma%20transplant&source=search_result&selectedTitle=1%7E150&usage_type=default&display_rank=1
4. National Comprehensive Cancer Network (NCCN). NCCN Clinical Practice Guidelines in Oncology (NCCN Guidelines): Hematopoietic Cell Transplantation Version 3.2023 [guideline on the internet]. Fort Washington, Pennsylvania: National Comprehensive Cancer Network; 2023 Oct 09 [cited 2024 March 5]. Available from: https://www.nccn.org/professionals/physician_gls/pdf/hct.pdf
5. Motixafortide: drug information. UpToDate [database on the Internet]. Waltham (MA): UpToDate; 2010 [cited 2024 March 5]. Available from: https://www.uptodate.com/contents/motixafortide-druginformation?search=aphexda&source=panel_search_result&selectedTitle=1%7E7&usage_type=panel&kp_tab=drug_general&display_rank=1
6. Plexafor: drug information. UpToDate [database on the Internet]. Waltham (MA): UpToDate; 2010 [cited 2024 March 5]. Available from: https://www.uptodate.com/contents/plexafor-druginformation?source=auto_suggest&selectedTitle=1~1---1~4---mozobi&search=mozobil
7. Aphexda [package insert]. Waltham (MA): BioLineRx Ltd; 2024 Oct.

Review History

06/12/24 – Created for P&T. New criteria developed for Aphexda. Adopted MH criteria. Effective 7/1/24.

06/11/25 – Reviewed and updated for P&T. Part of annual UM review. Updated formatting and references.

Clarified consult notes for the prescriber specialty requirement. Effective 7/1/25

