



Division: Pharmacy Policy	Subject: State of Florida's Agency for Health Care Administration's Prior Authorization Criteria
Original Development Date: Original Effective Date: Revision Date:	January 21, 2020  October 13, 2021, December 22, 2021

## **OXBRYTA™ (voxelotor)**

**LENGTH OF AUTHORIZATION:** Up to 6 months

### **INITIAL REVIEW CRITERIA:**

- Patient must have a diagnosis of sickle cell disease.
- Prescribed by or in consultation with a hematologist, or other specialist with expertise in the diagnosis and management of sickle cell disease.

Patients 12 years of age or older:

- Must have experienced at least one vaso-occlusive crisis within the past 12 months (documentation required).
- Must have a documented baseline hemoglobin range is  $\geq 5.5$  g/dL and  $\leq 10.5$  g/dL.

Patient 4 to < 12 years of age:

- Must not have experienced a vaso-occlusive crisis within 14 days of treatment (documentation required).
- Must have a documented baseline hemoglobin  $\leq 10.5$  g/dL.

### **CONTINUATION OF THERAPY:**

- Patient met initial review criteria.
- Documentation of positive clinical response from one of the following (1) increase in hemoglobin by  $\geq 1$ g/dL from baseline, (2) reduction in the number of sickle cell-related vaso-occlusive crises, (3) reduction in percent reticulocyte count from baseline **OR** (4) reduction in indirect bilirubin count from baseline.
- Dosing is appropriate as per labeling or is supported by compendia or standard of care guidelines.

### **DOSING AND ADMINISTRATION:**

- Refer to product labeling at <https://www.accessdata.fda.gov/scripts/cder/daf/>
- Available as 500 mg tablets and 300 mg tablets for oral suspension.