Market Applicability															
Market	DC	FL & FHK	FL MMA	FL LTC	GA	KS	KY	LA	MD	NJ	NV	NY	TN	TX	WA
Applicable	Х	Х	N/A	N/A	Х	N/A	Х	Х	Х	Х	Х	Χ	N/A	N/A	Χ

^{*}FHK- Florida Healthy Kids

Farydak (panobinostat)

Override(s)	Approval Duration
Prior Authorization Quantity Limit	1 year

Medications	Quantity Limit				
Farydak (panobinostat)	May be subject to quantity limit				

APPROVAL CRITERIA

Requests for Farydak (panobinostat) may be approved if the following criteria are met:

- I. Individual has a diagnosis of multiple myeloma; AND
- II. Individual has had trial (medication samples/coupons/discount cards are excluded from consideration as a trial) and inadequate response or intolerance to at least two (2) prior regimens, including bortezomib and an immunomodulatory agent (such as but not limited to, thalidomide or lenalidomide).

Note:

Farydak (panobinostat) has black box warnings for fatal and serious cardiac and severe diarrhea toxicities. Severe and fatal cardiac ischemic events, severe arrhythmias, and ECG changes have occurred in individuals receiving Farydak. Arrhythmias may be exacerbated by electrolyte abnormalities. Obtain ECG and electrolytes at baseline and periodically during treatment as clinically indicated. Monitor for diarrhea symptoms, institute antidiarrheal treatment, interrupt and then reduce dose or discontinue Farydak if diarrhea occurs.

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

Key References:

Clinical Pharmacology [database online]. Tampa, FL: Gold Standard, Inc.: 2017. URL: http://www.clinicalpharmacology.com. Updated periodically.

DailyMed. Package inserts. U.S. National Library of Medicine, National Institutes of Health website. http://dailymed.nlm.nih.gov/dailymed/about.cfm.

 $\label{thm:continuity} \textbf{DrugPoints} \\ \textbf{@ System (electronic version)}. \\ \textbf{Truven Health Analytics, Greenwood Village, CO. Updated periodically}.$

Lexi-Comp ONLINE™ with AHFS™, Hudson, Ohio: Lexi-Comp, Inc.; 2017; Updated periodically.

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This policy does not apply to health plans or member categories that do not have pharmacy benefits, nor does it apply to Medicare. Note that market specific restrictions or transition-of-care benefit limitations may apply.