

midostaurin (RYDAPT)

Diagnoses Considered for Coverage:

- Acute myeloid leukemia (AML), induction and consolidation
- Acute myeloid leukemia (AML), post-consolidation
- Systemic mastocytosis
 - Aggressive systemic mastocytosis
 - Systemic mastocytosis with associated hematological neoplasm
 - Mast cell leukemia
- Myeloid, lymphoid, or mixed lineage neoplasms with eosinophilia and FGFR1 or FLT3 rearrangement

Coverage Criteria:**For diagnosis of acute myeloid leukemia (AML):**

- Cancer is positive for FMS-like tyrosine kinase 3 mutation (FLT3), **and**
- One of the following:
 - Being administered as part of a cytarabine/daunorubicin induction or cytarabine consolidation chemotherapy regimen for AML, **or**
 - Being used as part of post-consolidation (post-remission/maintenance therapy) in combination with cytarabine, **or**
 - Patient has relapsed or refractory disease, **and**
- Dose does not exceed 100 mg per day given on days 8 through 21 every 21 to 28 day cycle

For diagnosis of aggressive systemic mastocytosis, systemic mastocytosis with associated hematological neoplasm, and mast cell leukemia:

- Being used as a single agent, **and**
- Dose does not exceed 200 mg per day.

For diagnosis of myeloid, lymphoid, or mixed lineage neoplasms:

- Provider attestation of eosinophilia, **and**
- Cancer is positive for FGFR1 or FLT3 rearrangement, **and**
- Dose does not exceed 200 mg per day.

For diagnosis of Chronic Myelomonocytic Leukemia (CMML):

- Being used as a single agent, **and**
- Dose does not exceed 200 mg per day.

Coverage Duration: one year

Effective Date: 6/28/2023