

idelalisib (ZYDELIG)

Diagnoses Considered for Coverage:

- Chronic lymphocytic leukemia (CLL)
- Small lymphocytic lymphoma (SLL)

Coverage Criteria:

For relapsed chronic lymphocytic leukemia and small lymphocytic lymphoma:

- Patient has disease progression despite treatment with one prior NCCN supported therapies, **and**
- Dose does not exceed 150 mg taken twice a day.

Coverage Duration: one year

Effective Date: 5/31/2023