# Doptelet® (avatrombopag)
# Mulpleta® (lusutrombopag)
# Effective January 1, 2020

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| **Plan** | ☒ MassHealth<br>☒Commercial/Exchange | **Program Type** | ☒ Prior Authorization<br>☐ Quantity Limit<br>☐ Step Therapy |
| **Benefit** | ☒ Pharmacy Benefit<br>☐ Medical Benefit (NLX) | | |
| **Specialty Limitations** | This medication has been designated specialty and must be filled at a contracted specialty pharmacy. | | |
| **Contact Information** | **Specialty Medications** | | |
| | All Plans | Phone: 866-814-5506 | Fax: 866-249-6155 |
| | **Non-Specialty Medications** | | |
| | MassHealth | Phone: 877-433-7643 | Fax: 866-255-7569 |
| | Commercial | Phone: 800-294-5979 | Fax: 888-836-0730 |
| | Exchange | Phone: 855-582-2022 | Fax: 855-245-2134 |
| | **Medical Specialty Medications (NLX)** | | |
| | All Plans | Phone: 844-345-2803 | Fax: 844-851-0882 |
| **Exceptions** | N/A | | |

## Overview
Doptelet and Mulpleta are thrombopoietin receptor agonists indicated for the treatment of thrombocytopenia in adults.

## Coverage Guidelines

**Doptelet**

Authorization may be granted for members who are currently receiving treatment with Doptelet for treatment of chronic immune thrombocytopenia (ITP) excluding when the product is obtained as samples or via manufacturer's patient assistance programs

**OR**

Authorization may be granted if all the following criteria is met and documentation has been submitted:

1. The member is at least 18 years of age
2. The member has diagnosis of chronic ITP
3. The member has platelet counts of <50,000 cells/microliter
4. The member has had an inadequate response, adverse reaction or contraindication to one corticosteroid and immunoglobulin OR the member has had a splenectomy.

**OR**

1. The member has a diagnosis of chronic liver disease and thrombocytopenia
2. The member has a platelet count of < 50,000 cells/microliter AND
3. The member is scheduled to undergo a procedure (date of planned procedure is documented) Therapy should be initiated 10-13 days prior to scheduled procedure

**Mulpleta**

Authorization may be granted if all the following criteria is met and documentation has been submitted:

1. The member is at least 18 years of age
2. The member has a diagnosis of chronic liver disease *and* thrombocytopenia
3. The member has a platelet count of <50,000 cells/microliter
4. The member is scheduled to undergo a procedure (date of planned procedure is documented) Therapy should be initiated 8-14 days prior to scheduled procedure

**Continuation of Therapy**

Reauthorizations for members with a diagnosis of Chronic ITP require documentation of improvement in platelet counts.

## Limitations

1. Approvals for members with a diagnosis of chronic liver disease and thrombocytopenia who will be undergoing a procedure, will be issued for 1 month for one course of therapy per authorization
2. Initial and reauthorizations for members with a diagnosis of Chronic ITP will be issued for 6 months
3. The following quantity limits apply:

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| Doptelet | 10 tablets for members with platelet count of 40,000 to <50,000 cells/microliter per procedure<br>15 tablets for members with platelet count of <40,000 cells/microliter per procedure |
| Mulpleta | 7 tablets per procedure |
| Doptelet (ITP) | #60 tablets per 30 days |

## References


1. Doptelet (avatrombopag) [prescribing information]. Durham, NC: Dova Pharmaceuticals, Inc; Revised: June 2019
2. Mulpleta (lusutrombopag) [prescribing information]. Florham Park, NJ: Shionogi Inc; July 2018.
3. Terrault NA, Hassanein T, Howell CD, et al. Phase II study of avatrombopag in thrombocytopenic patients with cirrhosis undergoing an elective procedure. J Hepatol 2014; 61:1253.
4. Bussel JB, Kuter DJ, Aledort LM, et al. A randomized trial of avatrombopag, an investigational thrombopoietin-receptor agonist, in persistent and chronic immune thrombocytopenia. Blood 2014; 123:3887.
5. Terrault N, Chen YC, Izumi N, et al. Avatrombopag Before Procedures Reduces Need for Platelet Transfusion in Patients with Chronic Liver Disease and Thrombocytopenia. Gastroenterology 2018; 155:705.
6. Katsube T, Ishibashi T, Kano T, Wajima T. Population Pharmacokinetic and Pharmacodynamic Modeling of Lusutrombopag, a Newly Developed Oral Thrombopoietin Receptor Agonist, in Healthy Subjects. Clin Pharmacokinet 2016; 55:1423.
7. Kim ES. Lusutrombopag: First Global Approval. Drugs 2016; 76:155.
8. Maan R, de Knegt RJ, Veldt BJ. Management of thrombocytopenia in chronic liver disease: focus on pharmacotherapeutic strategies. Drugs. 2015; 75:1981-92.


## Review History

02/20/19 – Approved by P&T

09/18/19 - Added new indication of treatment of chronic ITP

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