Clinical Policy: Plerixafor (Mozobil)
Reference Number: ERX.SPMN.236
Effective Date: 01/17
Last Review Date:

See Important Reminder at the end of this policy for important regulatory and legal information.

Policy/Criteria
It is the policy of health plans affiliated with Envolve Pharmacy Solutions™ that plerixafor (Mozobil™) is medically necessary when the following criteria are met:

I. Initial Approval Criteria
   A. Hematopoietic Stem Cell Mobilization (must meet all):
      1. Diagnosis of non-Hodgkin’s lymphoma (NHL) or multiple myeloma (MM);
      2. Therapy is prescribed for hematopoietic stem cell mobilization for subsequent autologous transplantation;
      3. Used in combination with granulocyte-colony stimulating factor (G-CSF);
      4. Prescribed dose of Mozobil does not exceed 40 mg/day.

      Approval duration: 4 days

   B. Other diagnoses/indications: Refer to ERX.SPMN.16 – Global Biopharm Policy.

II. Continued Approval
   A. Other diagnoses/indications (must meet 1 or 2):
      1. Currently receiving medication via health plan benefit and documentation supports positive response to therapy; or
      2. Refer to ERX.SPMN.16 - Global Biopharm Policy.

      Approval duration: 6 months

Background
Description/Mechanism of Action:
Plerixafor is an inhibitor of the CXCR4 chemokine receptor and blocks binding of its cognate ligand, stromal cell-derived factor-1α (SDF-1α). SDF-1α and CXCR4 are recognized to play a role in the trafficking and homing of human hematopoietic stem cells (HSCs) to the marrow compartment. Once in the marrow, stem cell CXCR4 can act to help anchor these cells to the marrow matrix, either directly via SDF-1α or through the induction of other adhesion molecules. Treatment with plerixafor resulted in leukocytosis and elevations in circulating hematopoietic progenitor cells in mice, dogs and humans. CD34+ cells mobilized by plerixafor were capable of engraftment with long-term repopulating capacity up to one year in canine transplantation models.

Formulations:
Mozobil: single-use vial of 1.2 mL of a 20 mg/mL solution containing a total of 24 mg of plerixafor
**Clinical Policy**

Plerixafor

**FDA Approved Indications:**
Mozobil (plerixafor injection) is indicated in combination with granulocyte-colony stimulating factor (G-CSF) to mobilize hematopoietic stem cells to the peripheral blood for collection and subsequent autologous transplantation in patients with non-Hodgkin’s lymphoma (NHL) and multiple myeloma (MM).

**Appendices**
**Appendix A: Abbreviation Key**
G-CSF: granulocyte-colony stimulating factor
MM: multiple myeloma
NHL: non-Hodgkin’s lymphoma

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**References**

**Important Reminder**
This clinical policy has been developed by appropriately experienced and licensed health care professionals based on a review and consideration of currently available generally accepted standards of medical practice; peer-reviewed medical literature; government agency/program approval status; evidence-based guidelines and positions of leading national health professional organizations; views of physicians practicing in relevant clinical areas affected by this clinical policy; and other available clinical information.

This Clinical Policy is not intended to dictate to providers how to practice medicine, nor does it constitute a contract or guarantee regarding payment or results. Providers are expected to exercise professional medical judgment in providing the most appropriate care, and are solely responsible for the medical advice and treatment of members.

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