

Chronic Myelogenous Leukemia (CML) Pathways

Patient Name: _____ Date of Birth: _____

Member Number: _____ Treatment Start Date: _____

ICD-10 Code: _____ Pathology: _____

Stage: New diagnosis or Relapse

Line of Treatment: First Line Second Line Third Line Third Line +

ECOG Performance Status: 0 1 2 3 4

Biomarkers:

CML Phase: Chronic Phase Accelerated Phase Lymphoid Blast Phase Myeloid Blast Phase Not Reported

Imatinib resistant or intolerant: Yes No

Philadelphia chromosome: Positive Negative

T315I: Positive Negative

Mutation: V299L T315I

First line of therapy (1st line)

Dasatinib* (Sprycel) for intermediate or high risk disease

Imatinib (Gleevec)

Nilotinib* (Tasigna) for intermediate or high risk disease

Second line of therapy (2nd line) | Following treatment failure, suboptimal response[†], or intolerance to first line therapy

Bosutinib (Bosulif)

Dasatinib (Sprycel)

Nilotinib (Tasigna)

Ponatinib[‡] (Iclusig)

Third line of therapy (3rd line)

Ponatinib (Iclusig)

* For patients with intermediate or high risk disease based on Sokal or Hasford Score:

- Sokal: Intermediate Risk=0.8-1.2; High Risk>1.2
- Hasford: Intermediate Risk=781-1480; High Risk>1480

† Defined as lack of complete hematologic response or BCR-ABL1 transcripts > 10% (IS) or lack of partial cytogenetic response on bone marrow cytogenetics.

‡ Pathway option for second line therapy only after failure, suboptimal response, or intolerance of a second generation TKI has been used in the first line setting, or T315I mutation has been identified.

Note: Pathway lists are solely for the purpose of eligibility for enhanced reimbursement and are independent of specific health plan medical policy coverage criteria. Health plan medical policy/clinical guidelines should be consulted to determine whether proposed services will be covered.