

**POLICY NAME**

Vioice (alpelisib)

**POLICY #**

3165P

## Criteria

### Coverage Criteria for PIK3CA-Related Overgrowth Spectrum (PROS)

- ☐ **1.1** Documented diagnosis of PIK3CA-related overgrowth spectrum (PROS)
  - Must include evidence of PIK3CA gene mutation
- ☐ **1.2** Documentation that patient's condition is severe or life-threatening and treatment is deemed necessary as determined by the treating physician
- ☐ **1.3** Documentation supporting at least one target lesion identified on imaging scans performed within the previous 6 months
- ☐ **1.4** Age 2 years or older
- ☐ **1.5** Prescribed by or in consultation with a geneticist (doctor specializing in genes and heredity) or specialist in the treatment of PROS
- ☐ **1.6** Review of clinical documentation confirming that patient has met all of the above requirements for treatment is completed by both a pharmacist and a medical director