

POLICY NAME	Pyrukynd (mitapivat)	POLICY #	3167P
--------------------	----------------------	-----------------	--------------

Criteria

Hemolytic Anemia related to Pyruvate Kinase Deficiency (PKD)

- ☐ **1.1** Diagnosis of hemolytic anemia related to Pyruvate Kinase Deficiency (PKD) as evidenced by genetic testing
 - Genetic testing must support at least two mutant alleles of the PKLR gene of which at least one is a missense mutation
- ☐ **1.2** Age 18 years or older
- ☐ **1.3** Prescribed by or in consultation with a hematologist (blood disorder doctor) or specialist in hemolytic anemia
- ☐ **1.4** Patient has required red blood cell transfusions within the last year
- ☐ **1.5** Hemoglobin level \leq 10 mg/dL
- ☐ **1.6** Currently taking folic acid 0.8mg daily

Exclusion Criteria – Any of the following prevents coverage

- ☐ **2.1** Patients homozygous for the R479H mutation
- ☐ **2.2** Patients with 2 non-missense mutations in PKLR, without another missense mutation (these patients did not demonstrate benefit from therapy in clinical trials)