

Pharmacy Drug Policy Checklist

POLICY NAME	Oxbryta (voxelotor)	POLICY #	2732P
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Criteria

Coverage Criteria		
	Diagnosis of sickle cell disease with one or more vaso-occlusive crises in the past year	
	Age 4 years or older	
	Prescribed by or in consultation with a hematologist (blood doctor)	
	Previous trial and failure, intolerance, or contraindication to hydroxyurea	
	Baseline hemoglobin (Hb) of less than or equal to 10.5g/dL	