



**Commercial PA Criteria**  
**Effective: December 18, 2023**

**Prior Authorization:** Ogsiveo (nirogacestat)

**Products Affected:** Ogsiveo (nirogacestat) oral tablets

**Medication Description:** Nirogacestat is a gamma-secretase inhibitor that blocks proteolytic activation of the Notch receptor. When dysregulated, Notch can activate pathways that contribute to tumor growth. Gamma-secretase inhibitors, such as nirogacestat, impair Notch signaling through selective inhibition of gamma-secretase-mediated cleavage of Notch receptors and in studies have shown to prevent the release of the Notch intracellular domain

**Covered Uses:** adult patients with progressing desmoid tumors who require systemic treatment.

**Exclusion Criteria:** None

**Required Medical Information:**

1. Diagnosis

**Prescriber Restriction:** Medication must be prescribed by, or in consultation with, an oncologist

**Age Restriction:** 18 years and older

**Coverage Duration:** 12 months

**Other Criteria:**

**Initial Approval Criteria**

**1. Desmoid Tumors (Aggressive Fibromatosis).** Approve if the patient meets the following:

- A. According to the prescriber, the patient has progressing desmoid tumors; **AND**  
*Note: Progressing desmoid tumors are defined as  $\geq 20\%$  progression within 12 months.*
- B. The desmoid tumors are not amenable to surgery; **AND**
- C. According to the prescriber, the patient requires systemic treatment.

**References:**

1. Product Information: OGSIVEO™ oral tablets, nirogacestat oral tablets. SpringWorks Therapeutics, Inc. (per FDA), Stamford, CT, 2023.

**Policy Revision history**

Rev #	Type of Change	Summary of Change	Sections Affected	Date
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May 2024



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1	New Policy	New Policy	All	12/18/2023
2	Annual Review	No criteria changes	All	5/14/2024

