

Kesimpta (ofatumumab) Criteria

Revised: 08/23/2024

KESIMPTA (OFATUMUMAB)

Length of Authorization: Initial – 6 months
Renewal – 1 year

CHILDREN – CRITERIA TO APPROVE

N/A

ADULTS – CRITERIA TO APPROVE

All the following:

- Diagnosis of relapsing forms of Multiple Sclerosis (MS) including clinically isolated syndrome, relapsing-remitting disease, and active secondary progressive disease
- 18 years of age or older
- Prescriber is a neurologist or consult notes from a neurologist are provided
- Inadequate response, adverse reaction, or contraindication to **one** of the preferred drugs for relapsing forms of MS
- Medication not to be used with other disease-modifying therapy for MS

ADULTS – RENEWAL CRITERIA

All the following:

- Member is responding well to therapy.
- Patient has not experienced any treatment-restricting adverse effects.

DOSING

Recommended adult dose: 20 mg at weeks 0, 1, and 2, followed by 20 mg once monthly starting at week 4

REVISION HISTORY

Date	Issues/Updates
08/21/2024	<ul style="list-style-type: none">Initial draft creation