

Medical Policy:
Casgevy

Last review date: 7/1/2026

Applicable Products:
Casgevy (exagamglogene autotemcel)

Initial Approval Criteria:

Coverage may be approved if all of the following are met:

- Patient has a diagnosis of one of the following:
 - Sickle cell disease (SCD) with recurrent vaso-occlusive crises (VOCs); **OR**
 - Transfusion-dependent β -thalassemia (TDT); **AND**
- Patient is at least 12 years of age; **AND**
- Must be prescribed by or in consultation with a hematologist; **AND**
- Patient does not have Human Immunodeficiency Virus (HIV-1 or HIV-2), Hepatitis B Virus (HBV), or Hepatitis C Virus (HCV); **AND**
- Patient has not received a prior allogenic or autologous HSC transplant; **AND**
- Prescriber attests to monitor for all of the following:
 - Delayed platelet engraftment and bleeding by frequently monitoring platelet counts until platelet engraftment and platelet recovery are achieved; **AND**
 - Neutrophil Engraftment failure by monitoring neutrophil counts until engraftment has been achieved; **AND**
 - Renal and hepatic function prior to treatment; **AND**
- Patient will not use any of the following:
 - Hydroxyurea for at least 8 weeks prior to mobilization; **AND**
 - Iron chelators at least 7 days prior to initiation of myeloablative conditioning; **AND**
 - Non-myelosuppressive iron chelators for at least 3 months after treatment; **AND**
 - Myelosuppressive iron chelators for at least 6 months after treatment; **AND**
 - Voxelotor for at least 8 weeks prior to mobilization; **AND**
 - Crizanlizumab for at least 8 weeks prior to mobilization; **AND**
- If applicable: Trial and failure, intolerance, or a contraindication to the preferred products as listed in the medical drug list

Renewal Criteria:

None

Length of Authorization:

1 dose per lifetime

This policy is designed to address medical guidelines that are appropriate for the majority of individuals with a particular disease, illness, or condition. Each person's unique clinical or other circumstances may warrant individual consideration, based on review of applicable medical records, as well as other regulatory, contractual and/or legal requirements.

Medical policies do not constitute medical advice, nor are they intended to govern the practice of medicine. They are intended to reflect reimbursement and coverage guidelines. Coverage for services may vary for individual members, based on the terms of the benefit contract.