If all the above requirements are met, the medication will be approved for 12 months.

For **reauthorization**:

1. Chart notes have been provided showing improvement of signs and symptoms of disease (such as reduced volume of new heterotopic ossifications, decreased flare ups, decreased pain or increased mobility); AND
2. If member has not reached skeletal maturity or final adult height, chart notes must include radiological evidence of appropriate bone age (x-ray results must be included) and linear growth.

If all the above requirements are met, the medication will be approved for an additional 12 months.

CareSource considers Sohonos (palovarotene) not medically necessary for the treatment of conditions that are not listed in this document. For any other indication, please refer to the Off-Label policy.

DATE	ACTION/DESCRIPTION
11/9/2023	New policy for Sohonos created.

References:

1. Sohonos [prescribing information]. Cambridge, MA: Ipsen Biopharmaceuticals, Inc.; 2023.
2. Pignolo RJ, Hsiao EC, Al Mukaddam M, et al. Reduction of New Heterotopic Ossification (HO) in the Open-Label, Phase 3 MOVE Trial of Palovarotene for Fibrodysplasia Ossificans Progressiva (FOP). *J Bone Miner Res.* 2023;38(3):381-394. doi:10.1002/jbmr.4762.
3. Kaplan FS, et al. TmnBT/F9q0.000009s18(p)-58(l)-8(a)13 0 1 72.1 4q7( )-29(e)18(r43.55 430.95 12.8 reWs)-37(:)] Tf