Teplizumab



Included Products: Tzield (teplizumab-mzwv)

Nonformulary for outpatient benefit. PA required on medical benefit.

Created: 03/09/2023 Revised: 03/09/2023 Reviewed: 03/09/2023 Updated: 04/01/2023

All Diagnoses			
Initial Criteria		If yes	If no
1.	Is the request from an endocrinologist?	Continue to #2.	Do not approve.
2.	Is the member > 8 years old?	Continue to #3.	Do not approve.
3.	Has the member had the following labs done prior to initiation, which are required per drug labeling?	Continue to #4.	Do not approve.
	a. Complete blood count (CBC)		
	b. Liver enzyme tests		
4.	Does the member have a diagnosis of stage 2 type 1 diabetes confirmed by the following?	Continue to #5.	Do not approve.
	 a. The presence of at least 2 pancreatic islet cell autoantibodies. 		
	 b. Dysglycemia without overt hyperglycemia using an oral glucose tolerance test (OGTT) or other method if OGTT unavailable. 		
5.	Has the provider assessed the member's clinical history and confirmed that the history does not suggest type 2 diabetes?	Continue to #6.	Do not approve.
6.	Approve for 14 doses.		