

GCHP Medi-Cal Clinical Guidelines Teprotumumab (Tepezza™)

PA Criteria	Criteria Details		
Covered Uses (FDA Approved Indication)	Treatment of thyroid eye disease regardless of thyroid eye disease activity or duration.		
Exclusion Criteria	None.		
Required Medical Information	<ul style="list-style-type: none">• Diagnosis of Grave’s disease associated with active thyroid eye disease (TED) with a clinical activity score (CAS) of greater than or equal to four for the most severely affected eye or patient has moderately to severely active TED, associated with at least one of the following:<ul style="list-style-type: none">○ Lid retraction equal to or greater than 2 mm○ Moderate or severe soft tissue involvement○ Proptosis equal to or greater than 3 mm○ Diplopia○ Corneal exposure• Euthyroid or with mild hypo- or hyperthyroidism defined as free thyroxine and free triiodothyronine levels less than 50% above or below the normal limits.• Does not require surgical ophthalmological intervention.• Must have well controlled diabetes if the member has diabetes (defined as HgbA1C < 9 at most recent clinic visit).• Contraindication, intolerance, or lack of response to glucocorticoids or a documented justification why the use of glucocorticoids is not appropriate.		
Age Restriction	18 years of age and older		
Prescriber Restrictions	Prescribed by or in consultation with an ophthalmologist, endocrinologist or a physician who specializes in treatment of thyroid eye disease.		
Coverage Duration	12 months (maximum of eight doses) per lifetime.		
Other Criteria / Information	Criteria adapted from DHCS March 2024		
	HCPCS	Description	Dosing, Units
	J3241	Injection, teprotumumab-trbw, 10mg (Tepezza™)	10mg/kg IV as a single dose followed by 20mg/kg IV every three weeks for seven additional doses.



STATUS	DATE REVISED	REVIEW DATE	APPROVED / REVIEWED BY	EFFECTIVE DATE
Created	5/1/2024	5/1/2024	Lily Yip, Director of Pharmacy Services; Yoonhee Kim, Clinical Programs Pharmacist	N/A
Approved	N/A	5/15/2024	Pharmacy & Therapeutics (P&T) Committee	3/1/2025
Approved	N/A	7/18/2024	Medical Advisory Committee (MAC)	3/1/2025