

PA Criteria	Criteria Details						
Covered Uses (FDA approved indication)	Vyvgart is a neonatal Fc receptor blocker indicated for the treatment of generalized myasthenia gravis (gMG) in adult patients who are anti-acetylcholine receptor antibody positive (AChR-Ab+).						
Exclusion Criteria	Must not be used in combination with similar therapies for myasthenia gravis including immune globulins, Soliris, Ultomiris, Rystiggo, or Zilbrysq. (Vyvgart has not been studied and there is no data to support use in combination with other medications used to treat MG)						
Required Medical Information	<p>For initial coverage: Medical records supporting the request must be provided.</p> <ol style="list-style-type: none"> Baseline Myasthenia Gravis Activities of Daily Living (MG-ADL) of at least five. Confirmed diagnosis of generalized myasthenia gravis that is anti-acetylcholine receptor antibody (AChR-Ab) positive. <p>For reauthorization: Must have a documented response to therapy evidenced by a stable or improved MG-ADL total score from baseline.</p>						
Age Restriction	None.						
Prescriber Restrictions	Must be prescribed by, or in consultation with, a neurologist.						
Coverage Duration	One year initial; two years reauthorization. Dose will be approved according to the FDA- approved labeling or within accepted standards of medical practice.						
Other Criteria/Information	<p>Refer to the Gold Coast Health Plan Medicare Part B Reference and Summary of Evidence document.</p> <table border="1"> <thead> <tr> <th>HCPCS</th> <th>Description</th> <th>Billing Units/How Supplied</th> </tr> </thead> <tbody> <tr> <td>J9332</td> <td>Vyvgart (efgartigimod alfa-fcab)</td> <td>Billing unit: 2 mg 400mg/20ml SDV</td> </tr> </tbody> </table>	HCPCS	Description	Billing Units/How Supplied	J9332	Vyvgart (efgartigimod alfa-fcab)	Billing unit: 2 mg 400mg/20ml SDV
HCPCS	Description	Billing Units/How Supplied					
J9332	Vyvgart (efgartigimod alfa-fcab)	Billing unit: 2 mg 400mg/20ml SDV					

STATUS	DATE REVISED	REVIEW DATE	APPROVED/REVIEWED BY	EFFECTIVE DATE
Created	3/26/2025	3/26/2025	Dawn Shojai, PharmD, Senior Pharmacy Benefit Consultant (PSG)	N/A
Approved	N/A	5/15/2025	Pharmacy & Therapeutics (P&T) Committee	5/15/2025