

Division: Pharmacy Policy	Subject: Prior Authorization Criteria
Original Development Date: Original Effective Date: Revision Date:	March 28, 2023

## TZIELD<sup>TM</sup> (teplizumab-mzwv)

## **LENGTH OF AUTHORIZATION:** One treatment course per lifetime

## **REVIEW CRITERIA**:

- Patient must be  $\geq 8$  years of age.
- Patient must have a confirmed diagnosis of Stage 2 Type 1 diabetes by both of the following:
  - Two positive pancreatic islet cell autoantibodies
    - Glutamic acid decarboxylase 65 (GAD) autoantibodies
    - Insulin autoantibody (IAA)
    - Insulinoma-associated antigen 2 autoantibody (IA-2A)
    - Zinc transporter 8 autoantibody (ZnT8A)
    - Islet cell autoantibody (ICA); AND
  - Dysglycemia on an oral glucose tolerance test (OGTT) or alternative method if appropriate and OGTT is not available.
- Clinical history of the patient must **NOT** suggest Type 2 diabetes.
- Patient has baseline complete blood count (CBC) with Lymphocytes > 1,000 cells per mcL.
- Patient has baseline liver enzyme tests.
- Documentation that all age-appropriate vaccinations have been administered prior to starting TZIELD.

## **DOSING AND ADMINISTRATION:**

- Refer to product labeling at <u>https://www.accessdata.fda.gov/scripts/cder/daf/</u>
- Administer by intravenous infusion (over a minimum of 30 minutes) once daily for 14 days.
- Available as 2 mg per 2 mL (1 mg/mL) single-dose vial for injection.