

# Zilretta® (triamcinolone extended-release) Effective 04/01/2023

Plan	<ul><li>✓ MassHealth UPPL</li><li>☐ Commercial/Exchange</li></ul>	Drogram Tuno	☑ Prior Authorization	
Benefit	<ul><li>☑ Pharmacy Benefit</li><li>☑ Medical Benefit</li></ul>	Program Type	☐ Quantity Limit ☐ Step Therapy	
Specialty Limitations	N/A			
Contact Information	Medical and Specialty Medications			
	All Plans P	hone: 877-519-1908	Fax: 855-540-3693	
	Non-Specialty Medications			
	All Plans P	hone: 800-711-4555	Fax: 844-403-1029	
Exceptions	N/A			

#### Overview

Zilretta® (triamcinolone extended-release) is an intra-articular corticosteroid injection indicated for the management of osteoarthritis pain of the knee.

No PA	Drugs that require PA
Celestone® # (betamethasone injection)	Zilretta <sup>®</sup> (triamcinolone extended-release injectable
Depo-Medrol® # (methylprednisolone acetate)	suspension)
dexamethasone injection	
Kenalog® # (triamcinolone injection)	
Solu-Cortef® # (hydrocortisone injection)	

#This is a brand-name drug with FDA "A"-rated generic equivalents. PA is required for the brand, unless a particular form of that drug (for example, tablet, capsule, or liquid) does not have an FDA "A"-rated generic equivalents

### **Coverage Guidelines**

Authorization may be granted for members when all the following criteria are met, and documentation is provided:

- 1. Diagnosis of osteoarthritis pain of the knee
- Physician attestation of inadequate response or adverse reaction to TWO different intra-articular corticosteroid injection preparations or contraindication to ALL other intra-articular corticosteroid injection preparations
- 3. Appropriate dosing

### Limitations

- 1. Initial approvals will be granted for 1 month (30 days)
- 2. Zilretta is not intended for repeat administration

#### References

- 1. Zilretta® [package insert].San Diegio(CA): Pacira Pharmaceuticals, Inc; 2022 Mar.
- 2. Micromedex®Healthcare Series [database on the internet]. Greenwood Village (CO): Truven Health Analytics. Updated periodically; [cited 2022 Sep 6]. Available from: http://www.thomsonhc.com/.

# **Review History**

01/11/23 - Reviewed and created for Jan P&T; matched MH UPPL. Created criteria to be in compliance with Masshealth unified formulary requirements. Effective 4/1/23

