

#### **Zilretta (triamcinolone extended-release)** Effective 06/01/2025 Plan ☑ Prior Authorization ☐ Commercial/Exchange **Program Type** ☐ Quantity Limit ☐ Pharmacy Benefit **Benefit** ☐ Step Therapy Specialty N/A Limitations **Medical and Specialty Medications** All Plans Phone: 877-519-1908 **Contact** Fax: 855-540-3693 Information **Non-Specialty Medications** All Plans Phone: 800-711-4555 Fax: 844-403-1029 N/A **Exceptions**

### Overview

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

# **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; 2025 Jan.
- 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

04/10/23 – Reviewed and updated for P&T. Zilretta will only be available on MB with PA. Effective 5/6/24 05/15/25 – Reviewed and created for P&T. Updated formatting and references. Effective 6/1/25