

STANDARD MEDICARE PART B MANAGEMENT

ZILRETTA (triamcinolone acetonide extended-release injectable suspension)

POLICY

I. INDICATIONS

The indications below including FDA-approved indications and compendial uses are considered a covered benefit provided that all the approval criteria are met and the member has no exclusions to the prescribed therapy.

FDA-Approved Indication

Zilretta is indicated as an intraarticular injection for the management of osteoarthritis pain of the knee.

Limitation of Use: The efficacy and safety of repeat administration of Zilretta have not been demonstrated.

All other indications will be assessed on an individual basis. Submissions for indications other than those enumerated in this policy should be accompanied by supporting evidence from Medicare approved compendia.

II. CRITERIA FOR INITIAL APPROVAL

Osteoarthritis pain of the knee

Authorization of one dose may be granted for treatment of osteoarthritis pain of the knee.

III. REFERENCES

1. Zilretta [package insert]. Burlington, MA: Flexion Therapeutics, Inc.; January 2020.