CVS Caremark®

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| Reference number(s) |
| 5156-A |

# Specialty Guideline Management Vabysmo

## Products Referenced by this Document

Drugs that are listed in the following table include both brand and generic and all dosage forms and strengths unless otherwise stated. Over-the-counter (OTC) products are not included unless otherwise stated.

| Brand Name | Generic Name |
| --- | --- |
| Vabysmo | faricimab-svoa |

## 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 Indications1

Vabysmo is indicated for the treatment of:

* Diabetic macular edema
* Neovascular (wet) age-related macular degeneration
* Macular edema following retinal vein occlusion

All other indications are considered experimental/investigational and not medically necessary.

## Coverage Criteria

### Diabetic Macular Edema1,2

Authorization of 6 months may be granted for treatment of diabetic macular edema.

### Neovascular (Wet) Age-Related Macular Degeneration1,3

Authorization of 6 months may be granted for treatment of neovascular (wet) age-related macular degeneration.

### Macular Edema Following Retinal Vein Occlusion1,4

Authorization of 6 months may be granted for treatment of macular edema following retinal vein occlusion

## Continuation of Therapy

Authorization of 12 months may be granted for continued treatment in members requesting reauthorization for an indication listed in coverage criteria section when the member has demonstrated a positive clinical response to therapy (e.g., improvement or maintenance in best corrected visual acuity [BCVA] or visual field, or a reduction in the rate of vision decline or the risk of more severe vision loss).

## References

1. Vabysmo [package insert]. South San Francisco, CA: Genentech, Inc.; July 2024.
2. American Academy of Ophthalmology Retinal/Vitreous Panel. Preferred Practice Pattern® Guidelines. Diabetic Retinopathy. San Francisco, CA: American Academy of Ophthalmology; 2019. Available at: https://www.aao.org/preferred-practice-pattern/diabetic-retinopathy-ppp.
3. American Academy of Ophthalmology Retinal/Vitreous Panel. Preferred Practice Pattern® Guidelines. Age-Related Macular Degeneration. San Francisco, CA: American Academy of Ophthalmology; 2019. Available at: https://www.aao.org/preferred-practice-pattern/age-related-macular-degeneration-ppp.
4. American Academy of Ophthalmology Retinal/Vitreous Panel. Preferred Practice Pattern® Guidelines. Retinal Vein Occlusions. San Francisco, CA: American Academy of Ophthalmology; 2019. Available at: https://www.aao.org/preferred-practice-pattern/retinal-vein-occlusions-ppp.