



STATE OF WEST VIRGINIA  
DEPARTMENT OF HUMAN SERVICES  
BUREAU FOR MEDICAL SERVICES

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Office of Pharmacy Services  
Prior Authorization Criteria  
Tryngolza® (olezarsen)  
Effective 5/21/2025

Prior Authorization Request Form

**TRYNGOLZA** is an apolipoprotein C-III (APOC-III) directed antisense oligonucleotide (ASO) indicated as an adjunct to diet to reduce triglycerides in adults with familial chylomicronemia syndrome (FCS).

**CRITERIA FOR APPROVAL:**

1. The patient must have a diagnosis of FCS supported by genetic testing identifying biallelic pathogenic mutations in genes related to FCS (LPL, LMF1, APOC2, APOA5, or GP1HBP1); **AND**
2. Must be prescribed by, or in consultation with, a M.D./D.O. cardiologist, endocrinologist, lipidologist or physician with specialized experience in treating severe hypertriglyceridemia; **AND**
3. The patient is within the age range as recommended by the Food and Drug Administration (FDA) label; **AND**
4. Laboratory tests (within the past six months) confirming fasting triglyceride level greater than or equal to ( $\geq$ ) 880 mg/dL while concurrently taking other prescribed lipid-lowering medications must be provided; **AND**
5. Documented prior use, exhibiting compliance, of lipid-lowering medications must be provided (including failures or intolerances); **AND**
6. Documentation indicating the patient has been counseled on the importance of dietary restrictions and is currently receiving a very low-fat diet (less than ( $<$ ) 20 grams of fat per day) and will maintain a low-fat diet while taking Tryngolza.

**CONTINUATION OF THERAPY CRITERIA:**

1. Patient continues to meet all initial approval criteria; **AND**
2. Demonstrate continued documented compliance; **AND**
3. Patient has a positive clinical response to Tryngolza therapy which is indicated by a 40% reduction from baseline in fasting triglyceride level confirmed by laboratory results (documentation must be provided).

Initial approvals may be authorized for 90 days. Further approvals may be granted for six months after all the continuation of therapy criteria has been met. All fills will be limited to a 30-day supply.

