

Tryngolza (olezarsen) Utilization Management Criteria

Non-Preferred Agents:	Tryngolza (olezarsen)
Implementation Date:	10/1/2026
Prepared For:	CT
PDL Status:	Non-preferred
Purpose:	Familial chylomicronemia syndrome (FCS) is a rare genetic condition characterized by severely elevated triglyceride levels. Patients with FCS are at risk for recurrent and potentially life-threatening, acute pancreatitis. Traditional triglyceride lowering medications are generally not effective in FCS. Severe hypertriglyceridemia (sHTG) is defined as having a triglyceride level of 500 mg/dL or more. Elevated triglycerides increase the risk of acute pancreatitis, which can be life-threatening. Several treatment options are available, and should be used alongside lifestyle modifications, where appropriate. Tryngolza is approved as an adjunct to diet to reduce triglycerides in adults with FCS and to reduce triglycerides and the risk of acute pancreatitis in adults with sHTG. In FCS, the most common adverse reactions were injection site reactions, decreased platelet count, and arthralgias. In sHTG, the most common adverse reactions were injection site reactions and increased liver enzymes.

Table 1. Tryngolza

Generic Name	Brand Name	Approved Indications	Route of Administration	Generic Availability
Olezarsen	Tryngolza®	Familial chylomicronemia syndrome (FCS) Severe hypertriglyceridemia (sHTG)	Subcutaneous	N/A

All authorizations must be prescribed in accordance with FDA approved labeling. Use of samples to initiate therapy does not meet continuation of therapy prior authorization requirements. Prior therapies will be verified through pharmacy claims and/or submitted chart notes.

Initial Therapy – All the following must be met:

- Patient aged 18 years old and older
- Prescribed by or in consultation with a specialist familiar with managing FCS or sHTG (e.g. lipidologist, cardiologist, gastroenterologist, endocrinologist, pancreatologist)
- Must meet one of the following:
 - Diagnosis of FCS confirmed by genetic testing
 - Diagnosis of sHTG (triglyceride level of ≥ 500 mg/dL) **AND**
 - Patient is on standard of care lipid lowering therapy with sub-optimal therapeutic

response

- Provider attests that Tryngolza will be used in conjunction with lifestyle modifications, including a low fat diet (< 20 g/day for a diagnosis of FCS)
- Tryngolza and Redemplo will not be used in combination
- Maximum quantity: One (50 mg or 80 mg) autoinjector once monthly

Initial PA length: 1 year

Exclusion Criteria: Approval criteria not met

Continuation Therapy: Documented compliance on current therapy regimen AND Provider attests to continued clinical benefit

Continuation Length: 1 year

References:

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5. Javed F, et al. Familial chylomicronemia syndrome: An expert clinical review from the National Lipid Association. *J Clin Lipidol*. 2025;19(3):382-403. doi:10.1016/j.jacl.2025.03.013
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Revision History

Date	Version	Revisions
7/31/2026	V1	Document approved by DSS