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Section:	Prescription Drugs	**Effective Date:**	July 17, 2026
Subsection:	Endocrine and Metabolic Agents	**Original Policy Date:**	December 9, 2022
Subject:	Tzield	**Page:**	1 of 5

Last Review Date: June 11, 2026

Tzield

Description

Tzield (teplizumab-mzwv)

Background
Tzield (teplizumab-mzwv) binds to CD3 (a cell surface antigen present on T lymphocytes) and delays the onset of Stage 3 type 1 diabetes in adults and pediatric patients 1 year of age and older with Stage 2 type 1 diabetes. The mechanism may involve partial agonistic signaling and deactivation of pancreatic beta cell autoreactive T lymphocytes. Tzield leads to an increase in the proportion of regulatory T cells and of exhausted CD8+ T cells in peripheral blood (1).

Regulatory Status
FDA-approved indication: Tzield is a CD3-directed antibody indicated to: (1)

- Delay the onset of Stage 3 type 1 diabetes (T1D) in adult and pediatric patients 1 year of age and older with Stage 2 T1D.
- Delay the decline in endogenous insulin production in pediatric patients aged 8 to 17 years recently diagnosed with Stage 3 T1D.

Limitations of Use: (1)

- There is limited evidence of safety and effectiveness in patients aged 45 years and older with Stage 2 T1D.
- Tzield is not effective as a disease modifying therapy in non-autoimmune dysglycemic conditions.

Select patients 1 year of age and older for Tzield treatment who have a diagnosis of Stage 2 type 1 diabetes. Stage 2 type 1 diabetes should be confirmed by documenting: (1)

- At least two positive pancreatic islet cell autoantibodies
- Dysglycemia without overt hyperglycemia using an oral glucose tolerance test (if an oral glucose tolerance test is not available, an alternative method for diagnosing dysglycemia without overt hyperglycemia may be appropriate)

Select pediatric patients aged 8 to 17 years recently diagnosed (within the last 8 weeks) with Stage 3 type 1 diabetes for Tzield treatment to delay the decline in endogenous insulin production based on confirmation of both of the following: (1)

- At least one positive pancreatic islet cell autoantibody
- Peak C-peptide ≥0.2 pmol/mL on a mixed-meal tolerance test (if a mixed meal tolerance test is not available, an alternative method for measuring peak C-peptide ≥0.2 pmol/mL may be appropriate)

Tzield contains a boxed warning regarding viral reactivation. Serious, life-threatening cases of viral reactivation, including Epstein-Barr virus (EBV) and cytomegalovirus (CMV) reactivation have been reported with Tzield. Patients who are immunocompromised are at increased risk. Test patients for active EBV and CMV infection prior to starting treatment. Adhere to lymphocyte count monitoring requirements and discontinuation recommendations. Monitor patients for signs and symptoms of viral reactivation following Tzield treatment and for at least 2 months following the last infusion (1).

Prior to initiating Tzield, a complete blood count and liver enzyme tests should be obtained. Use of Tzield is not recommended in patients with certain laboratory abnormalities (1).

Cytokine release syndrome (CRS) has been observed in Tzield-treated patients. Patients should be premedicated with antipyretics, antihistamines, and/or antiemetics prior to Tzield treatment. Liver enzymes should be monitored during treatment (1).

All age-appropriate vaccinations should be administered prior to starting Tzield. Live-attenuated vaccines should be administered at least 8 weeks prior to treatment. Inactivated vaccines or mRNA vaccines should be administered at least 2 weeks prior to treatment (1),

The safety and effectiveness of Tzield have not been established in pediatric patients less than 1 year of age with Stage 2 T1D. The safety and effectiveness of Tzield have not been established in pediatric patients less than 8 years of age with Stage 3 T1D (1).

Related policies

Policy

This policy statement applies to clinical review performed for pre-service (Prior Approval, Precertification, Advanced Benefit Determination, etc.) and/or post-service claims.

Tzield may be considered **medically necessary** if the conditions indicated below are met.

Tzield may be considered **investigational** for all other indications.

Prior-Approval Requirements

Diagnoses

Patient must have **ONE** of the following:

1. Stage 2 type 1 diabetes (T1D)
    a. 1 year of age or older
    b. Used to delay the onset of Stage 3 T1D
    c. Presence of two or more of the following pancreatic islet cell autoantibodies:
        i. Glutamic acid decarboxylase 65 (GAD) autoantibodies
        ii. Insulin autoantibody (IAA)
        iii. Insulinoma-associated antigen 2 autoantibody (IA-2A)
        iv. Zinc transporter 8 autoantibody (ZnT8A)
        v. Islet cell autoantibody (ICA)
    d. Dysglycemia without overt hyperglycemia using an oral glucose tolerance test (OGTT) **OR** an alternative method if OGTT is not available
2. Stage 3 type 1 diabetes (T1D)
    a. 8 to 17 years of age
    b. Diagnosed with Stage 3 T1D within the last 8 weeks
    c. Used to delay the decline in endogenous insulin production
    d. Presence of one or more of the following pancreatic islet cell autoantibodies:
        i. Glutamic acid decarboxylase 65 (GAD) autoantibodies
        ii. Insulin autoantibody (IAA)
        iii. Insulinoma-associated antigen 2 autoantibody (IA-2A)

iv. Zinc transporter 8 autoantibody (ZnT8A)
v. Islet cell autoantibody (ICA)

e. Peak C-peptide ≥0.2 pmol/mL on a mixed-meal tolerance test **OR** an alternative method if a mixed-meal tolerance test is not available

AND ALL of the following:

1. Prescriber agrees to monitor for signs and symptoms of viral reactivation and cytokine release syndrome (CRS)
2. Prescriber agrees to monitor complete blood count (CBC) and liver enzyme tests
3. Prescriber agrees to administer premedications as necessary, such as antipyretics, antihistamines, and antiemetics
4. Prescriber agrees that all age-appropriate vaccinations will be administered prior to starting Tzield

Prior – Approval *Renewal* Requirements

None

Policy Guidelines

Pre - PA Allowance

None

Prior - Approval Limits

Duration 12 months

Prior – Approval *Renewal* Limits

None

Rationale

Summary

Tzield is a CD3-directed antibody indicated to delay the onset of Stage 3 type 1 diabetes (T1D) in patients with Stage 2 T1D and to delay the decline in endogenous insulin production in patients recently diagnosed with Stage 3 T1D. Patients should be monitored for signs and symptoms of cytokine release syndrome (CRS) and patients should be premedicated with antipyretics, antihistamines, and/or antiemetics as necessary (1).

Prior authorization is required to ensure the safe, clinically appropriate, and cost-effective use of Tzield while maintaining optimal therapeutic outcomes.

References

1. Tzield [prescribing information]. Red Bank, NJ: Provention Bio, Inc.; June 2026.

Policy History

Date	Action
December 2022	Addition to PA
March 2023	Annual review. Per SME, added requirement “prescriber agrees that all age-appropriate vaccinations will be administered prior to starting Tzield”
September 2023	Annual review
March 2024	Annual review and reference update
September 2024	Annual review
September 2025	Annual review and reference update
May 2026	Per PI update, lowered age limit to 1 year of age and older and added monitoring requirement for viral reactivation
June 2026	Annual review
July 2026	Per PI update, added indication of delay the decline in endogenous insulin production in pediatric patients aged 8 to 17 years recently diagnosed with Stage 3 T1D

Keywords

This policy was effective with interim approval on July 17, 2026 and will be reviewed by the FEP® Pharmacy and Medical Policy Committee on September 17, 2026.