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BlueShield**

Federal Employee Program.

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<b>Section:</b>	Prescription Drugs	<b>Effective Date:</b>	April 1, 2026
<b>Subsection:</b>	Topical Products	<b>Original Policy Date:</b>	June 20, 2025
<b>Subject:</b>	Tryptyr	<b>Page:</b>	1 of 5

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**Last Review Date:** March 6, 2026

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## Tryptyr

### Description

#### Tryptyr (acoltremon ophthalmic solution)

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#### Background

Tryptyr (acoltremon) ophthalmic solution is a transient receptor potential melastatin 8 (TRPM8) thermoreceptor agonist used to treat signs and symptoms of dry eye disease (DED). TRPM8 thermoreceptor stimulation has been shown to activate trigeminal nerve signaling leading to increased basal tear production. The exact mechanism of action is unknown. Dry eye disease includes a group of conditions in which the eye does not produce an adequate volume of tears or when the tears are not of the correct consistency (1-2).

#### Regulatory Status

FDA-approved indication: Tryptyr is a TRPM8 thermoreceptor agonist indicated for treatment of the signs and symptoms of dry eye disease (1).

To avoid the potential for eye injury and contamination, do not touch the vial tip to the eye or other surfaces (1).

The safety and effectiveness of Tryptyr in pediatric patients less than 18 years of age have not been established (1).

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#### Related policies

Cyclosporine Ophthalmics, Eysuvis, Miebo, Tyrvaya, Xiidra

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<b>Subsection:</b>	Topical Products	<b>Original Policy Date:</b>	June 20, 2025
<b>Subject:</b>	Tryptyr	<b>Page:</b>	2 of 5

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## Policy

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

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

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

## Prior-Approval Requirements

**Age** 18 years of age or older

### Diagnosis

Patient must have the following:

1. Chronic dry eye
  - a. Patient has been evaluated by an optometrist, ophthalmologist, or a physician specializing in the treatment of the patient's condition
  - b. Inadequate treatment response, intolerance, or contraindication to **ONE** product from **EACH** of the following categories of dry eye treatment:
    - i. Cellulose or polyol containing artificial tears (e.g., active ingredients such as: hydroxyethyl cellulose, methylcellulose, Dextran 70, Glycerin, povidone, etc.)
    - ii. Lipid-containing artificial tears (e.g., active ingredients such as: mineral oil, castor oil, flaxseed oil, etc.)
    - iii. Legend ophthalmic for the treatment of dry eyes (see Appendix 1)
  - c. **NO** dual therapy with another legend ophthalmic for the treatment of dry eyes (see Appendix 1)

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## Prior – Approval *Renewal* Requirements

**Age** 18 years of age or older

### Diagnosis

Patient must have the following:

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<b>Section:</b>	Prescription Drugs	<b>Effective Date:</b>	April 1, 2026
<b>Subsection:</b>	Topical Products	<b>Original Policy Date:</b>	June 20, 2025
<b>Subject:</b>	Tryptyr	<b>Page:</b>	3 of 5

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1. Chronic dry eye
  - a. Patient has had an improvement in symptoms
  - b. **NO** dual therapy with another legend ophthalmic for the treatment of dry eyes (see Appendix 1)

## Policy Guidelines

### Pre - PA Allowance

None

### Prior - Approval Limits

**Quantity** 180 single-dose vials (3 cartons) every 90 days

**Duration** 12 months

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### Prior – Approval *Renewal* Limits

Same as above

## Rationale

### Summary

Tryptyr (acoltremon) ophthalmic solution is used to treat dry eye disease (DED). Dry eye disease includes a group of conditions in which the eye does not produce an adequate volume of tears or when the tears are not of the correct consistency. The exact mechanism of action is unknown. The safety and effectiveness of Tryptyr in pediatric patients less than 18 years of age have not been established (1-2).

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

### References

1. Tryptyr [package insert]. Fort Worth, TX: Alcon Laboratories, Inc.; May 2025.
2. Dry Eyes Syndrome Preferred Practice Pattern. American Academy of Ophthalmology. September 2018.

## Policy History

Date	Action
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# 5.90.077

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<b>Section:</b>	Prescription Drugs	<b>Effective Date:</b>	April 1, 2026
<b>Subsection:</b>	Topical Products	<b>Original Policy Date:</b>	June 20, 2025
<b>Subject:</b>	Tryptyr	<b>Page:</b>	4 of 5

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June 2025	Addition to PA
December 2025	Annual review
March 2026	Annual review

## [Keywords](#)

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**This policy was approved by the FEP® Pharmacy and Medical Policy Committee on March 6, 2026 and is effective on April 1, 2026.**

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<b>Section:</b> Prescription Drugs	<b>Effective Date:</b> April 1, 2026
<b>Subsection:</b> Topical Products	<b>Original Policy Date:</b> June 20, 2025
<b>Subject:</b> Tryptyr	<b>Page:</b> 5 of 5

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## Appendix 1 - List of Legend Ophthalmic Medications for Dry Eye

Generic Name	Brand Name
acoltremon	Tryptyr
cyclosporine	Cequa
cyclosporine	Restasis
cyclosporine	Vevye
lifitegrast	Xiidra
loteprednol	Eysuvis
perfluorohexyloctane	Miebo
varenicline	Tyrvaya

\*Verkazia is not approved for dry eye