

Exception Criteria

Zepbound

Products Referenced by this Document

Drugs that are listed in the following table include both brand and generic and all dosage forms and strengths except 2.5 mg/0.5 mL, 5 mg/0.5 mL, 7.5 mg/0.5 mL, and 10 mg/0.5 mL vials that are covered under the LillyDirect manufacturer program. Over-the-counter (OTC) products are not included unless otherwise stated.

Brand Name	Generic Name
Zepbound	tirzepatide

Indications

FDA-approved Indications

Zepbound is indicated in combination with a reduced-calorie diet and increased physical activity:

- To reduce excess body weight and maintain weight reduction long term in adults with obesity or adults with overweight in the presence of at least one weight-related comorbid condition.
- To treat moderate to severe obstructive sleep apnea (OSA) in adults with obesity.

Limitations of Use

- Zepbound contains tirzepatide. Coadministration with other tirzepatide-containing products or with any glucagon-like peptide-1 (GLP-1) receptor agonist is not recommended.

Coverage Criteria

Authorization may be granted for the requested drug when ALL of the following criteria are met:

- The patient CANNOT be treated with the formulary alternative (Available Formulary Alternative: Wegovy).

Reference number(s)
7056-A

- The patient has experienced an inadequate treatment response, intolerance, or has a contraindication to Wegovy. [ACTION REQUIRED: Documentation is required for approval.]

Duration of Approval (DOA)

- 7056-A: DOA: 12 months

References

1. Zepbound [package insert]. Indianapolis, IN: Lilly USA, LLC; April 2025.