Reference number(s)
6105-A

Specialty Guideline Management
Izervay

Products Referenced by this Document

Drugs that are listed in the following table include both brand and generic and all dosage forms and strengths unless otherwise stated. Over-the-counter (OTC) products are not included unless otherwise stated.

Brand Name	Generic Name
Izervay	avacincaptad pegol

Indications

The indications below including FDA-approved indications and compendial uses are considered a covered benefit provided that all the approval criteria are met and the member has no exclusions to the prescribed therapy.

FDA-Approved Indications[1]

Izervay is indicated for the treatment of geographic atrophy (GA) secondary to age-related macular degeneration (AMD).

All other indications are considered experimental/investigational and not medically necessary.

Documentation

Submission of the following information is necessary to initiate the prior authorization review:

Chart notes or medical records confirming the diagnosis of geographic atrophy (GA) secondary to age-related macular degeneration (AMD).

Exclusions

Coverage will not be provided for the treatment of geographic atrophy (GA) secondary to a condition other than age-related macular degeneration (AMD) (such as Stargardt disease, cone-rod dystrophy, toxic maculopathies).

Prescriber Specialties

This medication must be prescribed by or in consultation with an ophthalmologist.

Coverage Criteria

Geographic Atrophy (GA) Secondary to Age-related Macular Degeneration (AMD)[1,2]

Authorization of 12 months may be granted for treatment of geographic atrophy secondary to age-related macular degeneration.

Continuation of Therapy

Authorization of 12 months may be granted for continued treatment in members requesting reauthorization for an indication listed in the coverage criteria section when the member has demonstrated a positive clinical response to therapy (e.g., improvement or maintenance in best corrected visual acuity [BCVA] or visual field, or a reduction in the rate of vision decline or the risk of more severe vision loss).

References

1. Izervay [package insert]. Parsippany, NJ: Iveric Bio Inc; February 2025.
2. Age-Related Macular Degeneration PPP 2019. American Academy of Ophthalmology. Published October 2019. Accessed December 13, 2024. https://www.aao.org/education/preferred-practice-pattern/age-related-macular-degeneration-ppp.