



AETNA BETTER HEALTH®
Coverage Policy/Guideline

Name: Wegovy Cardiovascular and Zepbound OSA Page: 1 of 4

Effective Date: 5/1/2025 Last Review Date: 2/25/2025

Applies to: Florida Kids Pennsylvania Kids

Intent:

The intent of this policy/guideline is to provide information to the prescribing practitioner outlining the coverage criteria for Wegovy for Cardiovascular and Zepbound for Obstructive Sleep apnea, under the patient's prescription drug benefit.

Description:

FDA-Approved Indication

Wegovy

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

- to reduce the risk of major adverse cardiovascular events (cardiovascular death, non-fatal myocardial infarction, or non-fatal stroke) in adults with established cardiovascular disease and either obesity or overweight.
- to reduce excess body weight and maintain weight reduction long term in:
 - Adults and pediatric patients aged 12 years and older with obesity (*not a covered benefit*).
 - Adults with overweight in the presence of at least one weight-related comorbid condition (*not a covered benefit*).

Limitations of Use

Wegovy contains semaglutide. Coadministration with other semaglutide-containing products or with any other GLP-1 receptor agonist is not recommended.

Zepbound

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 (*not a covered benefit*).
- 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.

Use of Wegovy or Zepbound for the indication of weight loss only is an excluded benefit and will not be covered.

Applicable Drug List:

Wegovy
Zepbound

Policy/Guideline:

Criteria for Initial Approval:



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Obstructive Sleep Apnea – Zepbound ONLY

Authorization may be granted when the requested drug is being used to treat moderate to severe obstructive sleep apnea (OSA) in an adult with obesity when ALL the following criteria are met:

- The request is for Zepbound (tirzepatide).
- The requested drug is being used with a reduced-calorie diet AND increased physical activity.
- The patient has an established diagnosis of moderate to severe OSA with an apnea-hypopnea index (AHI) of at least 15 events per hour on polysomnography (PSG) or home sleep apnea test (HSAT) with a technically adequate device. Documentation is required for approval.
- The patient has a current body mass index (BMI) greater than or equal to 30 kg/m². [Documentation is required for approval.]

Risk Reduction of Major Adverse Cardiovascular Events – Wegovy ONLY

Authorization may be granted when the requested drug is being used to reduce the risk of major adverse cardiovascular events (cardiovascular death, non-fatal myocardial infarction (MI), or non-fatal stroke) in an adult with established cardiovascular disease AND either obesity or overweight when ALL the following criteria are met:

- The request is for Wegovy (semaglutide).
- The requested drug is being used with a reduced-calorie diet AND increased physical activity.
- The patient has established cardiovascular disease with a history of ONE of the following: [Documentation is required for approval.]
 - Previous MI.
 - Previous stroke.
 - Symptomatic peripheral arterial disease (PAD), as evidenced by intermittent claudication with ankle-brachial index (ABI) less than 0.85 (at rest), peripheral arterial revascularization procedure, or amputation due to atherosclerotic disease.
 - Prior history of revascularization (coronary artery bypass grafting (CABG), percutaneous coronary intervention (PCI), or angioplasty).
- The patient has a baseline body mass index (BMI) greater than or equal to 27 kg/m². Documentation is required for approval.

NOTE: If the patient is transitioning from another drug therapy for weight loss, please consider their baseline BMI at the start of any drug therapy.

- The patient does NOT have type 2 diabetes.
NOTE: Ozempic is indicated to reduce the risk of major cardiovascular events in adults with type 2 diabetes mellitus and established cardiovascular disease. Patients



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with type 2 diabetes may be treated for risk reduction of cardiovascular events with Ozempic.

- The patient is currently receiving guideline-directed management and therapy (GDMT) for cardiovascular disease (e.g., lipid-lowering agent, antiplatelet, beta-blocker, renin-angiotensin inhibitor, etc.) OR the patient has clinical reason not to be treated with GDMT for cardiovascular disease. Documentation is required for approval.

Continuation of Therapy

Obstructive Sleep Apnea – Zepbound ONLY

Authorization may be granted when the requested drug is being used to treat moderate to severe obstructive sleep apnea (OSA) in an adult with obesity when ALL the following criteria are met:

- The request is for Zepbound (tirzepatide).
- The requested drug is being used with a reduced-calorie diet AND increased physical activity.
- The patient has an established diagnosis of moderate to severe OSA with an apnea-hypopnea index (AHI) of at least 15 events per hour on polysomnography (PSG) or home sleep apnea test (HSAT) with a technically adequate device. Documentation is required for approval.
- The patient has achieved or maintained a positive response to treatment from baseline, evidenced by a decrease in OSA symptoms.
- The patient is being treated with a maintenance dosage, 10 mg or 15 mg once weekly, of the requested drug.

Risk Reduction of Major Adverse Cardiovascular Events – Wegovy ONLY

Authorization may be granted when the requested drug is being used to reduce the risk of major adverse cardiovascular events (cardiovascular death, non-fatal myocardial infarction (MI), or non-fatal stroke) in an adult with established cardiovascular disease AND either obesity or overweight when ALL the following criteria are met:

- The request is for Wegovy (semaglutide).
- The requested drug is being used with a reduced-calorie diet AND increased physical activity.
- The patient has established cardiovascular disease with a history of ONE of the following:
 - Previous MI.
 - Previous stroke.
 - Symptomatic peripheral arterial disease (PAD), as evidenced by intermittent claudication with ankle-brachial index (ABI) less than 0.85 (at rest), peripheral arterial revascularization procedure, or amputation due to atherosclerotic disease.



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- Prior history of revascularization (coronary artery bypass grafting (CABG), percutaneous coronary intervention (PCI), or angioplasty).
- The patient is being treated with a maintenance dosage of the requested drug

Approval Duration and Quantity Restrictions:

Initial Approval: 7 months

Renewal Approval: 12 months

Quantity Level Limit:

Drug	Dosage	Quantity Limit
Wegovy (semaglutide)	0.25 mg/0.5 mL	2 mL (1 package of 4 pens each) / 30 days
	0.5 mg/0.5 mL	
	1 mg/0.5 mL	
	1.7 mg/0.75 mL	3 mL (1 package of 4 pens each) / 30 days
	2.4 mg/0.75 mL	

Drug	Dosage	Quantity Limit
Zepbound (tirzepatide)	2.5 mg / 0.5 mL	2 mL (1 package of 4 pens each or 4 single-dose vials) / 28 days
Zepbound (tirzepatide)	5 mg / 0.5 mL	
Zepbound (tirzepatide)	7.5 mg / 0.5 mL	
Zepbound (tirzepatide)	10 mg / 0.5 mL	
Zepbound (tirzepatide)	12.5 mg / 0.5 mL	
Zepbound (tirzepatide)	15 mg / 0.5 mL	

References:

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5. Virani SS, Newby LK, Arnold SV, et al. 2023 AHA/ACC/ACCP/ASPC/NLA/PCNA Guideline for the Management of Patients With Chronic Coronary Disease: A Report of the American Heart Association/American College of Cardiology Joint Committee on Clinical Practice Guidelines. *Circulation*. 2023;148:e9-e119.
6. Kleindorfer DO, Towfighi A, Chaturvedi S, et al. 2021 Guideline for the Prevention of Stroke in Patients With Stroke and Transient Ischemic Attack: A Guideline From the American Heart Association/American Stroke Association. *Stroke*. 2021;52(7):e364-e467.
7. Gornik HL, Aronow HD, Goodney PP, et al. 2024 ACC/AHA/AACVPR/APMA/ABC/SCAI/SVM/SVN/SVS/SIR/VESS Guideline for the Management of Lower Extremity Peripheral Artery Disease: A Report of the American College of Cardiology/American Heart Association Joint Committee on Clinical Practice Guidelines. *J Am Coll Cardiol*. 2024;83(24):2497-2604.