AETNA BETTER HEALTH® Coverage Policy/Guideline			
Name:	Dry Eye Disease Agents (Cequa, Eysuvis, Miebo, Cyclosporine 0.05% Ophthalmic Emulsion vial, Tyrvaya, Vevye, Xiidra)	Page:	1 of 4
Effective Date:	2/2/2026	Last Review Date:	1/2026
Applies to:	☒Illinois ☐New Jersey ☐Pennsylvania Kids	☐Florida ☐Maryland ☐Virginia	☐Florida Kids ☐Michigan ☐KY PRMD

Intent:

The intent of this policy/guideline is to provide information to the prescribing practitioner outlining the coverage criteria for dry eye disease agents under the patient's prescription drug benefit.

Description:

FDA-approved Indications

Cequa

Cequa ophthalmic solution is a calcineurin inhibitor immunosuppressant indicated to increase tear production in patients with keratoconjunctivitis sicca (dry eye).

Eysuvis

Eysuvis is a corticosteroid indicated for the short-term (up to two weeks) treatment of the signs and symptoms of dry eye disease.

Miebo

Miebo (perfluorohexyloctane ophthalmic solution) is indicated for the treatment of the signs and symptoms of dry eye disease (DED).

Restasis

Restasis ophthalmic emulsion is indicated to increase tear production in patients whose tear production is presumed to be suppressed due to ocular inflammation associated with keratoconjunctivitis sicca. Increased tear production was not seen in patients currently taking topical anti-inflammatory drugs or using punctal plugs.

Tryptyr

Tryptyr is indicated for the treatment of the signs and symptoms of dry eye disease.

Tyrvaya

Tyrvaya (varenicline solution) nasal spray is indicated for the treatment of the signs and symptoms of dry eye disease.

Vevye

Vevye is indicated for the treatment of the signs and symptoms of dry eye disease.

Xiidra

Xiidra (lifitegrast ophthalmic solution) 5% is indicated for the treatment of the signs and symptoms of dry eye disease (DED).

Applicable Drug List:

Non-Preferred Agents:
Cyclosporine 0.05% Ophthalmic Emulsion Vial
Cequa
Eysuvis
Miebo
Tryptyr
Tyrvaya
Vevye
Xiidra

Policy/Guideline:

Coverage Criteria

Dry Eye Disease
Authorization may be granted when the requested drug is being prescribed for the treatment of dry eye disease when the following criteria is met:

- The request is for Cequa (cyclosporine), Cyclosporine 0.05% Ophthalmic Emulsion, Miebo (perfluorohexyloctane), Tryptyr (acoltremon), Tyrvaya (varenicline), Vevye (cyclosporine), or Xiidra (lifitegrast).
- The patient has experienced an inadequate treatment response, intolerance to, or a contraindication that would prohibit a trial to an artificial tears product

Short Term Dry Eye Disease
Authorization may be granted when the requested drug is being prescribed for the treatment of dry eye disease when the following criteria is met:

- The request is for Eysuvis AND the following criteria is met:
  - The requested drug is being prescribed for short-term use (up to two weeks).
  - The patient has experienced an inadequate treatment response, intolerance to, or a contraindication that would prohibit a trial to an artificial tears product.

Continuation of Therapy

Dry Eye Disease
Authorization may be granted when the requested drug is being prescribed for the treatment of dry eye disease when ALL of the following criteria are met:

- The request is for Cequa (cyclosporine), Cyclosporine 0.05% Ophthalmic Emulsion, Miebo (perfluorohexyloctane), Tryptyr (acoltremon), Tyrvaya (varenicline), Vevye (cyclosporine), or Xiidra (lifitegrast).
- The patient achieved or maintained improvement in their signs and symptoms of dry eye disease from baseline (e.g., ocular irritation, redness, mucous discharge, reduced visual function, ocular surface damage, reduced tear production).

Short Term Dry Eye Disease

All patients (including new patients) requesting authorization for continuation of therapy for Eysuvis must meet ALL requirements in the initial coverage criteria section.

Approval Duration and Quantity Restrictions:

Approval Duration:

- Cequa, Miebo, Cyclosporine 0.05% Ophthalmic Emulsion vial, Tryptyr, Tyrvaya, Vevye, Xiidra (Dry eye disease): 12 months
- Eysuvis (Short term dry eye disease): 3 months

Quantity Level Limit:

Drug	Limit
Cequa (cyclosporine ophthalmic soln)	60 vials / 30 days
Miebo (perfluorohexyl octane ophthalmic soln)	1 multi-dose bottle (3 mL) / 30 days
cyclosporine ophthalmic emlsn	60 vials / 30 days
Tryptyr (acoltremon ophthalmic solution)	60 single-dose vials / 30 days
Tyrvaya (varenicline nasal spray soln)	2 nasal spray bottles (8.4 mL) / 30 days
Vevye (cyclosporine ophthalmic soln)	1 multi-dose bottle (2 mL) / 30 days
Xiidra (lifitegrast ophthalmic soln)	60 containers (1 carton) / 30 days

For short-term acute use.

Drug	Limit
Eysuvis (loteprednol etabonate ophthalmic susp 0.25%)	2 bottles (16.6 mL) / 90 days

References:

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3. Miebo [package insert]. Bridgewater, NJ: Bausch & Lomb Americas Inc.; January 2024.
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5. Restasis Multidose [package insert]. Irvine, CA: Allergan, Inc; September 2024.
6. Tryptyr [package insert]. Fort Worth, TX: Alcon Laboratories, Inc. May 2025.
7. Tyrvaya [package insert]. Princeton, NJ: Oyster Point Pharma, Inc.; September 2024.
8. Vevye [package insert]. Nashville, TN: Harrow Eye, LLC.; November 2023.
9. Xiidra [package insert]. East Hanover, NJ: Novartis Pharmaceuticals Corporation; June 2020.
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12. Akpek EK, Amescua G, Farid M, et al. Dry Eye Syndrome Preferred Practice Pattern. Ophthalmology. 2019;126(1):P286-P334.
13. Pharmacy Auditing and Dispensing Job Aid: Billing Other Dosage Forms. Centers for Medicare and Medicaid Services. December 2015.