

## Commercial/Healthcare Exchange PA Criteria

*Effective: January 1, 2020*

**Prior Authorization:** SymlinPen

**Products Affected:** SymlinPen (pramlintide acetate) Subcutaneous Solution Pen-injector

**Medication Description:** Pramlintide is a synthetic analog of amylin, a hormone co-secreted with insulin from pancreatic beta cells. Pramlintide is used as an adjunct to insulin therapy in patients with type 1 and type 2 diabetes mellitus. Amylin secretion is absent in patients with type 1 diabetes and decreased in patients with type 2 diabetes. Decreased amylin concentrations contribute to persistent postprandial hyperglycemia and weight gain; accordingly, amylin replacement therapy with pramlintide complements insulin's effects in achieving glycemic control, especially in controlling postprandial hyperglycemia. Pramlintide slows gastric emptying, reduces postprandial glucagon secretion, and modulates appetite leading to decreased caloric intake. When used in combination with insulin, pramlintide further reduces A1C concentrations.

**Covered Uses:** Adjunctive treatment in patients with type 1 or type 2 diabetes who use mealtime insulin therapy and who have failed to achieve desired glucose control despite optimal insulin therapy.

**Exclusion Criteria:**

1. Hypoglycemia unawareness
2. Confirmed gastroparesis

**Required Medical Information:**

1. Diagnosis
2. Current treatment regimen
3. Current A1c (hemoglobin A1c) and blood sugar readings

**Age Restrictions:** 18 years of age and older

**Prescriber Restrictions:** N/A

**Coverage Duration:** 12 months

**Other Criteria:**

1. The patient has a diagnosis of Type 1 or Type 2 diabetes; AND
2. The patient is currently receiving optimal mealtime insulin therapy; AND
3. The patient has failed to achieve desired glucose control (uncontrolled diabetes) despite optimal insulin therapy.

**References:**

1. Product Information: SYMLIN<sup>(R)</sup> subcutaneous injection, pramlintide acetate subcutaneous injection. AstraZeneca Pharmaceuticals LP (per manufacturer), Wilmington, DE, 2016.

Rev #	Type of Change	Summary of Change	Sections Affected	Date
1	New Policy	New Policy	All	October 18, 2019