



Division: Pharmacy Policy	Subject: Prior Authorization Criteria
Original Development Date: Original Effective Date: Revision Date:	February 27, 2024  April 26, 2024

## MOUNJARO<sup>®</sup> (tirzepatide)

**LENGTH OF AUTHORIZATION:** Up to one year

**INITIAL REVIEW CRITERIA:**

- Patient must be  $\geq 18$  years of age.
- Must have a diagnosis of type 2 diabetes mellitus with initial A1c documentation.
- Trial and failure of metformin within the past 2 years unless contraindicated or the patient is intolerant to treatment.
- Failure to achieve goal A1c despite documented trial of both Trulicity AND Ozempic for 6-months each at a maximum tolerated dose within the past 2 years.
  - Clinical documentation of follow-up A1c values required.

**CONTINUATION OF THERAPY:**

- Patient met initial review criteria.
- Dosing is appropriate as per labeling or is supported by compendia.

**DOSING AND ADMINISTRATION:**

- Refer to product labeling <https://www.accessdata.fda.gov/scripts/cder/daf/>
- Available as: 2.5 mg, 5 mg, 7.5 mg, 10 mg, 12.5 mg, or 15 mg per 0.5 mL single-dose pen or single-dose vial.