



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

MOUNJARO[®] (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.
- Documentation of trial and failure of a preferred Sodium-Glucose Co-Transporter (SGLT-2) Inhibitor Agent.
- Documentation of trial and failure to Trulicity and Ozempic.

CONTINUATION OF THERAPY:

- Patient met initial review criteria.
- Documentation of positive clinical response.
- 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.