

## PRIOR AUTHORIZATION CRITERIA

**BRAND NAME**  
(generic)

**SYMLIN**  
(pramlintide acetate)

**SYMLINPEN**  
(pramlintide acetate)

**Status:** CVS Caremark Criteria  
**Type:** Initial Prior Authorization

### POLICY

#### FDA-APPROVED INDICATIONS

Symlin/SymlinPen is indicated as an 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.

#### COVERAGE CRITERIA

The requested drug will be covered with prior authorization when the following criteria are met:

- The patient has been receiving the requested drug for at least 3 months AND has demonstrated a reduction in A1c (hemoglobin A1c) since starting this therapy.

**OR**

- The patient has a diagnosis of diabetes mellitus AND has failed to achieve desired glucose control despite receiving optimal insulin therapy, including mealtime insulin.

#### REFERENCES

1. Symlin/SymlinPen [package insert]. San Diego, CA: Amylin Pharmaceuticals, Inc.; April 2016.
2. AHFS DI (Adult and Pediatric) [database online]. Hudson, OH: Lexi-Comp, Inc.; [http://online.lexi.com/lco/action/index/dataset/complete\\_ashp](http://online.lexi.com/lco/action/index/dataset/complete_ashp) [available with subscription]. Accessed July 2017.
3. Micromedex Solutions [database online]. Greenwood Village, CO: Truven Health Analytics Inc. Updated periodically. [www.micromedexsolutions.com](http://www.micromedexsolutions.com) [available with subscription]. Accessed July 2017.
4. Standards of Medical Care in Diabetes-2017: American Diabetes Association (ADA). *Diabetes Care* January 2017;40(Supplement1).
5. Garber A, Barzilay J, Bloomgarden Z, et al. American Association of Clinical Endocrinologists' Comprehensive Diabetes Management Algorithm 2016. *Endocr Pract.* 2016; 22:84-113.
6. Handelsman Y, Bloomgarden ZT, Grunberger G, et al. American Association of Clinical Endocrinologists and American College of Endocrinology – Clinical Practice Guidelines for developing a diabetes mellitus comprehensive care plan. *Endocr Pract.* 2015;21(Suppl 1):1-87.