

Amylin Analogs Criteria

Revised: 09/17/2024

SYMLIN PEN (PRAMLINTIDE ACETATE)

Length of Authorization: 1 year

CHILDREN – CRITERIA TO APPROVE

N/A

ADULTS – CRITERIA TO APPROVE

All the following:

- **One** of the following diagnoses:
 - Type 1 diabetes; **OR**
 - Type 2 diabetes
- Inadequate response (defined as a paid claim of at least a 30-day supply within the previous 90 days), adverse reaction, or contraindication to insulin

ADULTS – RENEWAL CRITERIA

All the following:

- The patient met initial review requirements
- Clinical response to therapy has been submitted (supporting documentation is required)

REVISION HISTORY

Date	Issues/Updates
08/01/2024	• Initial draft creation
09/17/2024	• Revised

Orange Text = Important Information | **Teal Text = Auto PA**

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