



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

MOUNJARO[®] (tirzepatide)

LENGTH OF AUTHORIZATION: Up to one year

INITIAL REVIEW CRITERIA:

- Patient must be ≥ 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.