

Thiazolidinedione Agents Step Therapy

| Override(s) | Approval Duration |
|---------------------------------------|-------------------|
| Prior Authorization Quantity Limit | 1 year |

| Medications | Quantity Limit |
|--------------|----------------------------------|
| Pioglitazone | May be subject to quantity limit |

APPROVAL CRITERIA

Requests for a thiazolidinedione agent may be approved if the following criteria are met:

- I. Individual has had a trial (medication samples/coupons/discount cards are excluded from consideration as a trial) and inadequate response or intolerance to metformin (AAACE/ACE 2020); **OR**
- II. Individual has a contraindication to metformin therapy;

AND

- III. Individual has had a trial (medication samples/coupons/discount cards are excluded from consideration as a trial) with the following:
 - A. One preferred glucagon-like peptide-1 (GLP-1) receptor agonist; **OR**
 - B. One preferred dipeptidyl peptidase-4 (DPP-4) inhibitor; **OR**
 - C. One preferred sodium-glucose co-transporter-2 (SGLT2) inhibitor.

Preferred GLP-1 receptor agonists: Ozempic, Trulicity, Victoza.

Preferred DPP-4 inhibitors: Janumet, Janumet XR, Januvia.

Preferred SGLT2 inhibitors: Jardiance, Synjardy, Synjardy XR.

Key References:

1. DailyMed. Package inserts. U.S. National Library of Medicine, National Institutes of Health website. <http://dailymed.nlm.nih.gov/dailymed/about.cfm>. Accessed: January 17, 2021.
2. DrugPoints® System [electronic version]. Truven Health Analytics, Greenwood Village, CO. Updated periodically.
3. Garber AJ, Handelsman Y, Grunberger G, et. al. Consensus Statement by the American Association of Clinical Endocrinologists and American College of Endocrinology (AACE/ACE) on the Comprehensive Type 2 Diabetes Management Algorithm – 2020 Executive Summary. *Endocrine Practice*. 2020;26:107-139.
4. Lexi-Comp ONLINE™ with AHFS™, Hudson, Ohio: Lexi-Comp, Inc.; 2021; Updated periodically.
5. US Food and Drug Administration. FDA Drug Safety Communication: FDA revises warnings regarding use of the diabetes medicine metformin in certain patients with reduced kidney function. Last updated: November 14, 2017. Available at <https://www.fda.gov/Drugs/DrugSafety/ucm493244.htm>. Accessed: January 15, 2021.

Federal and state laws or requirements, contract language, and Plan utilization management programs or policies may take precedence over the application of this clinical criteria.

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