# Criteria-Based Consultation Prescribing Program CRITERIA FOR DRUG COVERAGE

## Insulin Lispro (Admelog pen)

<u>Initiation (new start) criteria:</u> Non-formulary **insulin lispro (Admelog pen)** will be covered on the prescription drug benefit when the following criteria are met:

 The member has a documented allergic reaction to an inactive ingredient in Humalog AND unbranded biologic insulin lispro that is not present in Admelog

### -AND-

### Meets 1 of the following clinical criteria:

- Diagnosis of Type 1 diabetes mellitus -OR-
- On insulin pump therapy -OR-
- Use while pregnant -OR-
- Diagnosis of Type 2 diabetes mellitus and insulinopenia\* -OR-
- Patients with Type 2 diabetes mellitus who require intensive glycemic control (4 or more insulin injections per day) AND have recurrent hypoglycemia with regular insulin defined as 3 or more episodes of low blood sugar (less than 70 mg/dL) over the preceding 30 days that persists despite regular insulin dose adjustments

### -AND-

#### Meets 1 of the following Insulin Pen Criteria:

- Unable to draw up insulin accurately from a vial with a syringe due to young age, visual impairment, physical disabilities (i.e., amputations, tremors/Parkinson's disease, rheumatoid arthritis), or history of IV drug use -OR-
- Pediatric patient who is required to use such devices by school -OR-
- Type 1 diabetes mellitus

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Revised: 04/14/22 Effective: 06/02/22 All plans offered and underwritten by Kaiser Foundation Health Plan of the Northwest



<sup>\*</sup> Insulinopenia is defined as a fasting c-peptide level of 0.88 ng/mL or less with a concurrent glucose of 70-225 mg/dL OR in patients with renal insufficiency (creatinine clearance of 50 mL/min or less), a fasting c-peptide level of 1.6 ng/mL or less with a concurrent glucose of 70-225 mg/dL.

## Criteria-Based Consultation Prescribing Program CRITERIA FOR DRUG COVERAGE

## Insulin Lispro (Admelog pen)

<u>Criteria for new members entering Kaiser Permanente already taking the</u>
<u>medication who have not been reviewed previously</u>: Non-formulary insulin lispro
(Admelog pen) will be covered on the prescription drug benefit when the following criteria are met:

 The member has a documented allergic reaction to an inactive ingredient in Humalog AND unbranded biologic insulin lispro that is not present in Admelog

### -AND-

### Meets 1 of the following clinical criteria:

- Diagnosis of Type 1 diabetes mellitus -OR-
- On insulin pump therapy -OR-
- Use while pregnant -OR-
- Diagnosis of Type 2 diabetes mellitus and insulinopenia\* -OR-
- Patients with Type 2 diabetes mellitus who require intensive glycemic control (4 or more insulin injections per day) AND have recurrent hypoglycemia with regular insulin defined as 3 or more episodes of low blood sugar (less than 70 mg/dL) over the preceding 30 days that persists despite regular insulin dose adjustments

### -AND-

### Meets 1 of the following Insulin Pen Criteria:

- Unable to draw up insulin accurately from a vial with a syringe due to young age, visual impairment, physical disabilities (i.e., amputations, tremors/Parkinson's disease, rheumatoid arthritis), or history of IV drug use -OR-
- Pediatric patient who is required to use such devices by school -OR-
- Type 1 diabetes mellitus

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