



Drug Name: Alogliptin, Alogliptin-metformin, Alogliptin-pioglitazone, Tradjenta, Jentadueto, Jentadueto XR, Januvia, Janumet, Janumet XR

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Required Medical Information:	<ul style="list-style-type: none"> • If patient's most recent Hgb A1c is less than 10%: <ul style="list-style-type: none"> ○ Patient is diagnosed with Type 2 Diabetes Mellitus (T2DM); and ○ Patient has failed a recent trial with an adequate or maximized dose and appropriate duration of metformin (at least 2 grams/day); and ○ Patient has failed at least one other generic antihyperglycemic medication (e.g. sulfonylurea product). • If patient's most recent Hgb A1c is equal to or greater than 10%: <ul style="list-style-type: none"> ○ Patient has failed an adequate dose and duration of basal insulin therapy.
Renewal Criteria:	<ul style="list-style-type: none"> • A1c in the past 30 days showing clinical improvement
Coverage Duration:	<ul style="list-style-type: none"> • Initial: 4 months • Continuation of therapy: <ul style="list-style-type: none"> • A1c improvement \geq 0.5% then approve for 3 years • A1c improvement between 0.2%-0.5% then approve 4 months • Need to have improvement of at least 0.2% to be approved upon continuation