



Division: Pharmacy Policy	Subject: Prior Authorization Criteria
Original Development Date: Original Effective Date: Revision Date:	March 2, 2010 June 15, 2012, March 11, 2015, December 22, 2016

## **Victoza<sup>®</sup> (liraglutide injection)**

**LENGTH OF AUTHORIZATION: UP TO SIX MONTHS**

**REVIEW CRITERIA:**

- Patient must be  $\geq 18$  years old.
- Must have a diagnosis of type 2 diabetes mellitus.
- Must have a minimum three month trial with metformin and a preferred glucagon-like peptide-1 agonist.
- Hemoglobin A1C  $\geq 7\%$  (within last 6 months).

**DOSING:**

- Administer once daily at any time of day, independently of meals.
- Initiate at 0.6 mg per day for one week. This dose is intended to reduce gastrointestinal symptoms during initial titration, and is not effective for glycemic control.
- After one week, increase the dose to 1.2 mg. If the 1.2 mg dose does not result in acceptable glycemic control, the dose can be increased to 1.8 mg.