Overview
Metformin is an antihyperglycemic agent which improves glucose tolerance in patients with type 2 diabetes mellitus, lowering both basal and postprandial plasma glucose. Metformin decreases hepatic glucose production, decreases intestinal absorption of glucose, and improves insulin sensitivity by increasing peripheral glucose uptake and utilization. With metformin therapy, insulin secretion remains unchanged while fasting insulin levels and day-long plasma insulin response may decrease.

Coverage Guidelines

Fortamet and Glumetza
Authorization may be granted for members who are currently receiving treatment with Fortamet or Glumetza, excluding when the product is obtained as samples or via manufacturer’s patient assistance programs

OR
Authorization may be granted if the member meets all following criteria and documentation has been submitted:

1. Patient has tried generic extended-release metformin (must be generic Glucophage XR 500mg or Glucophage XR 750mg) at the requested dose for at least 90 days AND had a documented inadequate response OR
2. A documented side effect, allergy or contraindication.

Riomet and Riomet ER Solution
Authorization may be granted for members who are currently receiving treatment with Riomet or Riomet ER solution excluding when the product is obtained as samples or via manufacturer’s patient assistance programs
OR
Authorization may be granted if the member meets all following criteria and documentation has been submitted:

1. Member has a diagnosis of type 2 diabetes mellitus
2. Member is 10 years of age or older
3. Patient has a medical necessity for a liquid formulation
4. Patient has inadequate response to generic metformin tablets OR
5. A documented side effect, allergy or contraindication to a generic metformin

Continuation of Therapy
Reauthorization may be granted for members who have met the initial criteria and documentation of clinical response has been submitted (e.g. reduction of symptoms).

Limitations
1. Approvals will be granted for 36 months

References
2. Glumetza (metformin) [prescribing information]. Bridgewater, NJ: Salix Pharmaceuticals; October 2019.
3. Glumetza (metformin) [product monograph]. Montreal, Quebec, Canada: Valeant Canada; June 2012.
5. Riomet (metformin) [prescribing information]. Cranbury, NJ: Sun Pharmaceuticals; November 2018.

Review History
07/01/2017 – Effective
04/24/2018 – Reviewed
04/17/2019 – Reviewed in P&T Meeting
05/20/2020 – Added Riomet ER solution formulation. Effective 7/1/2020

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