



STATE OF WEST VIRGINIA  
DEPARTMENT OF HEALTH AND HUMAN RESOURCES  
BUREAU FOR MEDICAL SERVICES



Office of Pharmacy Service  
Prior Authorization Criteria

Korlym® (mifepristone)  
[Prior Authorization Request Form](#)

**Effective 10/01/2017**

KORLYM (mifepristone) is a cortisol receptor blocker indicated to control **hyperglycemia** secondary to hypercortisolism in adult patients with endogenous Cushing's syndrome who have type 2 diabetes mellitus or glucose intolerance and have failed surgery or are not candidates for surgery. NOTE: Korlym should not be used for the treatment of type 2 diabetes mellitus unrelated to endogenous Cushing's syndrome.

**Prior Authorization Criteria:**

1. Patient must have a diagnosis of hyperglycemia secondary to Cushing's Syndrome; **AND**
2. Patient must be at least 18 years of age; **AND**
3. Prior authorization request must be submitted by or in close consultation with an endocrinologist; **AND**
4. Documentation has been submitted that the patient is not pregnant and has been counseled that they must not become pregnant while taking this medication and for at least 1 month after treatment has been stopped; **AND**
5. The patient has failed surgery to treat the condition (e.g., pituitary surgery, adrenal surgery) or is not a candidate for this type of surgery. **AND**
6. Patient must have inadequate results or a contraindication to treatment with metformin, insulin and a GLP-1 agonist (used in combination if necessary).

**References**

- 1.) Lexi-Comp drug monograph for Korlym (Reviewed 7/06/2017)
- 2.) Korlym Package Insert (updated 5/2017)
- 3.) UpToDate clinical monograph (reviewed 7/6/2017)
- 4.) Treatment of Cushing's Syndrome: An Endocrine Society Clinical Practice Guideline. J Clin Endocrinol Metab (2015) 100 (8): 2807-2831.
- 5.) Fleseriu, Maria: Recent advances in the medical treatment of Cushing's disease F1000Prime Reports 2014, 6:18 (doi:10.12703/P6-18)
- 6.) Cuevas-Ramos et al. Update on medical treatment for Cushing's disease. Clinical Diabetes and Endocrinology (2016) 2:16 DOI 10.1186/s40842-016-0033-9