

# PRIOR AUTHORIZATION (PA) INFORMATIONAL CHECKLIST

For your reference, please see the following checklist designed as a guide to list supporting clinical documentation that may be required by the insurance plan. The following information is relevant for patients diagnosed with the FDA-approved indication for the applicable Mirum product.

Insurance plans may process PA requests quickly if expedited review is requested by the healthcare provider.

## Criteria for Insurance Plans Without Policy

### Clinical Diagnosis

- ☐ Genetic Test Results, Preferred
- ☐ Biochemical Results
  - ☐ Urine 23S Pentol
  - ☐ Cholestanol
  - ☐ Plasma 7 $\alpha$ 12 $\alpha$ C or 7 $\alpha$ C4 if Available
- ☐ Chart Notes Supporting Cerebrotendinous Xanthomatosis (CTX)
  - ☐ Diarrhea
  - ☐ History of Cataracts
  - ☐ Tendon Xanthomas
  - ☐ Neurological Signs/Symptoms

### Drug History, If Applicable

- ☐ Document Current History of chenodiol (CDCA) Use
  - ☐ Duration of Treatment
  - ☐ Outcomes of Treatment

### Supporting Clinical Documentation

- ☐ Documentation of Current Weight
- ☐ Labs (ALT, AST, Bilirubin)

## Reauthorization Considerations

- ☐ Improvement in Cholestanol
- ☐ Improvement in Urine 23S Pentol
- ☐ Stability in Other Clinical Signs/Symptoms of CTX

### IMPORTANT: NO GUARANTEE OF COVERAGE OR REIMBURSEMENT IS MADE BY CHECKING THE ABOVE BOXES

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