

POLICY NAME	Sensipar (cinacalcet)	POLICY #	1148P
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Criteria

Criteria for Coverage for Primary Hyperparathyroidism

- ☐ Documented diagnosis of Primary Hyperparathyroidism
- ☐ Serum calcium level greater than 8.4mg/dL
- ☐ Unable to have parathyroid glands surgically removed

Criteria for Coverage for Hypercalcemia with Parathyroid Carcinoma

- ☐ Diagnosis of hypercalcemia with parathyroid carcinoma

Criteria for Coverage for Secondary Hyperparathyroidism

- ☐ Documented diagnosis of Secondary Hyperparathyroidism
- ☐ Serum calcium level greater than 8.4mg/dL
- ☐ Diagnosed chronic kidney disease (CKD)
- ☐ Current dialysis treatments