Commercial insurance checklist

This checklist can help you receive Sensipar® (cinacalcet) at the lowest possible cost. You can use this checklist if you:

- Have commercial* prescription insurance
- Have been prescribed Sensipar®

Step completed	Step description
○	Your health care professional will submit a Prior Authorization form, if required
○	Visit the Sensipar® support programs page at AmgenAssist.com to learn about the Sensipar® Pharmacy Card • The Sensipar® Pharmacy Card can lower your Sensipar® co-pay to **$5.00**, if you qualify
○	Apply for the Sensipar® Pharmacy Card • Talk to your health care professional to see if you qualify • Provide the necessary form(s) to your health care professional
○	Activate your Sensipar® Pharmacy Card
○	Fill your Sensipar® prescription
○	Tell your health care professional that you received your Sensipar®

If your Sensipar® (cinacelcet) co-pay is more than $5.00 or you have any problems filling your prescription, discuss it with the dialysis staff at your next session.

* The commercial section includes federal employees and those patients receiving insurance benefits through Veterans Affairs/Department of Defense.

Sensipar® (cinacalcet) is indicated for the treatment of secondary hyperparathyroidism (HPT) in patients with chronic kidney disease (CKD) on dialysis.

Sensipar® is indicated for the treatment of severe hypercalcemia in patients with primary HPT who are unable to undergo parathyroidectomy.

Sensipar®
(cinacalcet) Tablets
30mg·60mg·90mg

Indication

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Important Safety Information

Sensipar® treatment should not be initiated if serum calcium is less than the lower limit of the normal range (8.4 mg/dL).

Sensipar® lowers serum calcium; therefore, it is important that patients are carefully monitored for the occurrence of hypocalcemia.

Significant reductions in calcium may lower the threshold for seizures. Secondary hyperparathyroidism (HPT) patients, particularly those with a history of seizure disorder, should be carefully monitored for the occurrence of low serum calcium or symptoms of hypocalcemia.

In Sensipar® postmarketing use, isolated, idiosyncratic cases of hypotension, worsening heart failure, and/or arrhythmia were reported in patients with impaired cardiac function. The causal relationship to Sensipar® therapy could not be completely excluded and may be mediated by reductions in serum calcium levels.

Adynamic bone disease may develop if intact parathyroid hormone (iPTH) levels are suppressed below 100 pg/mL.

Patients with moderate to severe hepatic impairment should be monitored throughout treatment with Sensipar®, as cinacalcet exposure assessed by area under the curve (AUC) was higher than in patients with normal hepatic function.

Serum calcium and serum phosphorus should be measured within 1 week and PTH should be measured 1 to 4 weeks after initiation or dose adjustment of Sensipar®. Once the maintenance dose has been established, serum calcium and serum phosphorus should be measured approximately monthly, and PTH every 1 to 3 months.

The most commonly reported side effects were nausea, vomiting, and diarrhea.