PriorityHealth

Pharmacy Prior Authorization Form

Fax completed form to: 877.974.4411 toll free, or 616.942.8206

This form applies to: ☐ **Commercial (Traditional)** ☐ **Commercial (Individual/Optimized)** ☒ **Medicaid**

This request is: ☐ **Urgent** (life threatening) ☐ **Non-Urgent** (standard review)

Urgent means the standard review time may seriously jeopardize the life or health of the patient or the patient's ability to regain maximum function.

Adempas® (riociguat)

Member

Last Name: _____ First Name: _____

ID #: _____ DOB: _____ Gender: _____

Primary Care Physician: _____

Requesting Provider: _____ Prov. Phone: _____ Prov. Fax: _____

Provider Address: _____

Provider NPI: _____ Contact Name: _____

Provider Signature: _____ Date: _____

Product Information

☐ New Request ☐ Continuation Request

Drug product:

- ☐ Adempas 0.5 mg tablet
- ☐ Adempas 1 mg tablet
- ☐ Adempas 1.5 mg tablet
- ☐ Adempas 2 mg tablet
- ☐ Adempas 2.5 mg tablet

Start date (or date of next dose): _____

Date of last dose (if applicable): _____

Dosing frequency: _____

Drug cost information

The wholesale acquisition cost for 1 tablet is $90.98. The annual cost of treatment with this drug is more than $98,250.

Precertification Requirements

Before this drug is covered, patient must meet one of the following criteria (please submit applicable medical records):

1. Must have chronic thromboembolic pulmonary hypertension (CTEPH), World Health Organization (WHO) Group 4, AND
    a. Recurrent or persistent CTEPH after documented pulmonary endarterectomy (PEA), OR
    b. Inoperable CTEPH with the diagnosis confirmed by both of the following (I and II):
        i. Computed tomography (CT)/Magnetic resonance imaging (MRI) angiography or pulmonary angiography
        ii. Pretreatment right heart catheterization with all the of the following results:
            1. MPAP ≥ 25mmHg
            2. PCWP ≤ 15 mmHg
            3. PVR > 3 Wood units
2. Must have pulmonary arterial hypertension (PAH), World Health Organization (WHO) Group 1, AND
    a. Member has WHO functional Class II or III symptoms prior to initiation of Adempas therapy
    b. Diagnosis confirmed by pre-treatment right heart catheterization with the following results:
        i. MPAP ≥ 25mmHg
        ii. PCWP ≤ 15 mmHg
        iii. PVR > 3 Wood units

All fields must be complete and legible for review. Your office will receive a response via fax. No changes made since 02/2018

Last reviewed 07/2020

Note: Authorization for indications, dosing, or a route of administration not approved by the Food and Drug Administration (FDA) or recognized in CMS-accepted compendia (e.g. DrugDex, AHFS, U.S. Pharmacopeia, and also Clinical Pharmacology for oncology indications only) require supporting evidence for coverage. Please provide two published peer-reviewed literature articles supporting the appropriateness of the drug, the dosing of the drug, or the route of administration to be used for the identified indication.

Priority Health Precertification Documentation

A. What condition is this drug being requested for?

- ☐ Chronic thromboembolic pulmonary hypertension (CTEPH)
- ☐ Pulmonary arterial hypertension (PAH)
- ☐ *Other – the patient's condition is:* _____

Rationale for use: _____

B. What World Health Organization Group category does this patient's clinical classification belong to?

- ☐ Group 1
- ☐ Group 2
- ☐ Group 3
- ☐ Group 4
- ☐ Group 5

C. Has documentation been provided to confirm a diagnosis of CTEPH or PAH?

☐ Yes ☐ No

D. What is the patient's WHO functional class?

- ☐ Class I
- ☐ Class II
- ☐ Class III
- ☐ Class IV

E. What other drug treatments has the patient used for pulmonary arterial hypertension?

Drug name: _____ Date: _____
Drug name: _____ Date: _____
Drug name: _____ Date: _____

Additional information

WHO Group	Clinical classification	Etiology
1	Pulmonary arterial hypertension	▪ Idiopathic, familial, congenital heart abnormalities ▪ Connective tissue disorder ▪ Portal hypertension ▪ HIV ▪ Anorexigen-induced PAH
2	Pulmonary hypertension associated with left-sided heart disease	
3	Pulmonary hypertension associated with lung diseases or hypoxemia	
4	Chronic thromboembolic pulmonary hypertension	
5	Pulmonary hypertension with miscellaneous etiology	

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