

Priority Health Medicare prior authorization form

Fax completed form to: 877.974.4411 toll free, or 616.942.8206

This form applies to: Medicare Part B Medicare Part D
 This request is: Expedited request Standard request

Your request will be expedited if you haven't gotten the prescription and Priority Health Medicare determines, or your prescriber tells us, that your life or health may be at risk by waiting.

Remicade[®] (infliximab)

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: _____

Drug information

New Request Continuation Request

Drug product: Remicade 100 mg **Dose:** _____ **Dose Frequency:** _____
Start date: _____
Date of last dose: _____
Date of next dose: _____

Prior authorization criteria

The following requirements need to be met before this drug is covered by Priority Health Medicare. These requirements have been approved by the Centers for Medicare and Medicaid Services (CMS), but you may ask us for an exception if you believe one or more of these requirements should be waived.

For this drug to be covered, the patient must meet the following criteria:

1. Must be used for a medically-accepted indication*
2. Must have a negative TB test within the last 12 months (testing must be done yearly)
3. For certain diagnoses, additional criteria is required:

Diagnosis	Additional criteria required
Ankylosing spondylitis, plaque psoriasis, psoriatic arthritis	Trial and failure with either Enbrel or Humira
Crohn's disease	Documented therapeutic trial and clinical failure with Humira
Rheumatoid arthritis	Documented therapeutic trial of at least one DMARD <i>AND</i> either Enbrel or Humira
Ulcerative colitis	Therapeutic trial of at least one of the following: aminosalicylates or steroids

Medically accepted indication*

This drug is only covered under Medicare Part D when it is used for a medically accepted indication. A medically accepted indication is a use of the drug that is *either*:

- approved by the Food and Drug Administration. (That is, the Food and Drug Administration has approved the drug for the diagnosis or condition for which it is being prescribed.)
- — or — supported by certain reference books. (These reference books are the American Hospital Formulary Service Drug Information and the DRUGDEX Information System)

**New request
Priority Health Precertification Documentation**

A. What is the date and result of the patient's last TB test?

Date: _____ Negative
 Positive

B. What condition is this drug being requested for?

The patient's condition is:	Additional information needed based on the patient's condition
<input type="checkbox"/> Ankylosing spondylitis <input type="checkbox"/> Psoriatic arthritis <input type="checkbox"/> Plaque psoriasis	Which of the following drugs has the patient tried and failed? <input type="checkbox"/> Enbrel <input type="checkbox"/> Humira <input type="checkbox"/> None of the above
<input type="checkbox"/> Crohn's disease	Has the patient had a therapeutic trial and clinical failure with Humira? <input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> Rheumatoid arthritis	Which of the following drugs has the patient tried? <input type="checkbox"/> non-biologic DMARD – drug name: _____ <input type="checkbox"/> Enbrel <input type="checkbox"/> Humira
<input type="checkbox"/> Ulcerative colitis	Which of the following drugs has the patient tried? <input type="checkbox"/> Aminosalicylates <input type="checkbox"/> Corticosteroids <input type="checkbox"/> None of the above

Priority Health Medicare exception request

Do you believe one or more of the prior authorization requirements should be waived? Yes No
If yes, you must provide a statement explaining the medical reason why the exception should be approved.

Would Remicade likely be the most effective option for this patient?

No
 Yes, because: _____

If the patient is currently using Remicade, would changing the patient's current regimen likely result in adverse effects for the patient?

No
 Yes, because: _____