

MEDICAL RX COVERAGE DETERMINATION REQUEST FORM

Patient Name			Prescriber Name		
Member ID #			Prescriber NPI#	Tax ID Number	
Sex (circle) M F			DOB	Office Phone	Office Fax
Height	Weight	Allergies	Servicing Provider (if applicable)	Servicing Provider Address	
Contact Person			Servicing Provider NPI#	Tax ID Number	
Medication, Strength & Dose			Route of Admin.	Directions	
☐ New Therapy: Date to Start: _____			Expected Length of Therapy		
☐ Continuation: Date Began: _____					
Diagnosis for Medication Treatment			ICD10 Code	HCPCS Code	
Prescriber's Signature (Required)				Date	
<u>This section must be completed.</u> Incorrect completion may result in delays in reimbursement or provision of service.					
☐ Medical benefit ("Buy and Bill") – HCPCS Code: _____ Total Billable Units: _____					
Supporting Administration Code(s) – HCPCS Code: _____					
Site of Service – <u>This section must be completed.</u>					
Please select the infusion service administration setting:					
☐ Standalone ambulatory infusion site, off-campus		☐ Outpatient hospital			
☐ Home infusion		☐ Infusion center on hospital campus			
☐ Standalone provider office					
Rationale for Exception Request or Prior Authorization (Must attach supporting clinical notes)					
☐ Alternate covered drug(s) contraindicated or previously tried, but with adverse outcome (e.g., toxicity, allergy, or Therapeutic failure) and completed MedWatch Form. Specify: (1) Covered drug(s) contraindicated or tried; (2) adverse outcome for each; (3) if therapeutic failure, length of therapy on each:					
☐ Complex patient with one or more chronic conditions (including, for example, psychiatric condition, diabetes) is stable on current drug(s); high risk of significant adverse clinical outcome with medication change. Specify: (1) Anticipated significant adverse clinical outcome(s) below:					

- ☐ Medical need for different dosage form and/or higher dosage. **Specify:** (1) New dosage form; (2) Dosage tried; (3) Documented medical reason.
- ☐ Other: (Explain below)

Required Explanation: