

# OPTIMA HEALTH PLAN

## PHARMACY PRIOR AUTHORIZATION/STEP-EDIT REQUEST\*

Directions: *The prescribing physician must sign and clearly print name (preprinted stamps not valid) on this request. All other information may be filled in by office staff; fax to 1-800-750-9692. No additional phone calls will be necessary if all information (including phone and fax #s) on this form is correct. Incomplete form will delay the authorization process.*

**Drug Name:** Iressa® (gefitinib)

**DRUG INFORMATION:** Please complete below. Incomplete information will delay the authorization process.

**Drug Form/Strength/Month:** \_\_\_\_\_

**Dosing Schedule:** \_\_\_\_\_ **Length of Therapy:** \_\_\_\_\_

**Diagnosis:** \_\_\_\_\_ **ICD Code:** \_\_\_\_\_

**CLINICAL CRITERIA:** All boxes **MUST** be checked to qualify. Lab results **must** be attached to this request. Incomplete data will delay the authorization process.

- Prescriber is an Oncologist
- Does member have metastatic non-small cell lung cancer (NSCLC) whose tumors have epidermal growth factor receptor (EGFR) exon 19 deletions or exon 21 (L858R)  Yes  No
- Laboratory test was submitted documenting exon 19 deletion or exon 21. (Therascreen EGFR RGQ PCR Kit)  Yes  No

**Medication being provided by a Specialty Pharmacy (Please check applicable box below):**

- For Optima Commercial Members:**  
PropriumRx
- For Optima Family Care Members:**  
Sentara Norfolk General CM Pharmacy

**\*\*Use of samples to initiate therapy does not meet step edit/ preauthorization criteria. \*\***

**\*Previous therapies will be verified through pharmacy paid claims or submitted chart notes.\***

**Patient Name:** \_\_\_\_\_

**Member Optima #:** \_\_\_\_\_ **Date of Birth:** \_\_\_\_\_

**Prescriber Name:** \_\_\_\_\_

**Prescriber Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Office Contact Name:** \_\_\_\_\_

**Phone Number:** \_\_\_\_\_ **Fax Number:** \_\_\_\_\_

**DEA OR NPI #:** \_\_\_\_\_

\*Approved by Pharmacy and Therapeutics Committee: 8/18/2016

REVISED/UPDATED: 1/26/2018