

OPTIMA HEALTH PLAN

PHARMACY/MEDICAL 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 1-844-723-2094. No additional phone calls will be necessary if all information (including phone and fax #s) on this form is correct. Incomplete form will delay authorization process.

Drug Requested: Makena™ (17-hydroxyprogesterone caproate -17-OHPC) (J1725) (Medical)

DRUG INFORMATION: Complete information below. If incomplete, authorization process will be delayed.

Drug Form/Strength/Quantity/Month: _____

Dosing Schedule: _____ Length of Therapy: _____

Diagnosis: _____ ICD Code: _____

RECOMMENDED DOSING:

Administer IM at a dose of 250mg (1mL) once weekly. Begin treatment between 16 weeks 0 days and 20 weeks 6 days of gestation. Continue administration once weekly until 37 (through 36 weeks 6 days) of gestation or delivery, whichever occurs first. 5mL multidose vial (250mg/mL) contains 1250mg hydroxyprogesterone caproate. 1 vial/month

CLINICAL CRITERIA: All criteria below MUST be met to qualify. If incomplete, authorization process will be delayed.

- Patient has a history of previous spontaneous birth at less than 37 weeks gestation and current pregnancy is a singleton pregnancy
- Calculate EDC/EDD: _____
- Current gestational age: _____ weeks: _____ days: _____

Medication being provided by (check applicable box below):

Physician's office

OR

Specialty Pharmacy:

PropriumRx

****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: 3/31/2009

REVISED/UPDATED: 6/2/2011; 8/18/2011; 4/2/2012; 4/19/2012; 10/1/2012; 4/9/2014; 10/31/2014; 4/3/2015; 5/23/2015; 6/17/2015;

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