MedStar Medicare Choice
Pharmacy Services
Phone: 855-266-0712
Fax: 855-862-6517

AUBAGIO
Prior Authorization Form

□ Standard Request (72 hours) □ Expedited Request (24 hours)	If you or your prescriber believe that waiting 72 hours for a standard decision could seriously harm your life, health, or ability to regain maximum function, you can request an expedited decision. For expedited requests you will receive a decision within 24 hours. You cannot request an expedited coverage determination if you are requesting reimbursement for a drug you already received.

Demographics

Patient Information		Prescriber Information	
Patient Name:		Prescriber Name:	
DOB:	Age:	NPI#:	Specialty:
Health Plan ID#:		Phone:	Fax:
Pharmacy Name:	Pharmacy Phone:	Office Contact:	Direct Phone # or Ext:

Medication Information

Medication:	Strength:	Directions:	Quantity Dispensed:	Day Supply:
Aubagio	□ 7 mg Tablet □ 14 mg Tablet			
□ New medication □ Continuation of therapy	Start Date:	If this is continuation of therapy, please provide CHART DOCUMENTATION indicating the member showed improvement while on therapy.		

Clinical Information

Diagnosis:	Date of Diagnosis:

Does the member have a relapsing form of Multiple Sclerosis? □ Yes □ No
Does the member have severe hepatic impairment? □ Yes □ No
Does the member have evidence of active infection? □ Yes □ No
Has the member previously tried at least one other medication for MS (please list below)? □ Yes □ No
Is the patient pregnant (if of childbearing age, please provide negative pregnancy test result)? □ Yes □ No

Product	Trial Dates	Reason for Failure

Is the member on concomitant therapy with antineoplastic, immunosuppressive therapy, or immune modulating therapies? □ Yes □ No

Medication	Dose/Strength	Frequency

Has the member had the following labs within the **past 6 months**?

Complete Blood Count (CBC)? □ Yes □ No Date:_____
Transaminase and Bilirubin level? □ Yes □ No Date:_____
PPD (tuberculin) test □ Positive □ Negative Date:_____

Please provide any additional information which should be considered in the space below: