

Axtle™ (Pemetrexed; J9292), Pemfexy® (Pemetrexed; J9304) & Pemrydi® RTU (Pemetrexed; J9324)
Prior Authorization Form**Member Name:** _____ **Date of Birth:** _____ **Member ID#:** _____**Drug Information****Physician billing (HCPCS code:** _____ **) Start Date (or date of next dose):** _____**Dose:** _____ **Regimen:** _____**Billing Provider Information****Provider NPI:** _____ **Provider Name:** _____**Provider Phone:** _____ **Provider Fax:** _____**Prescriber Information****Prescriber NPI:** _____ **Prescriber Name:** _____**Prescriber Phone:** _____ **Prescriber Fax:** _____ **Specialty:** _____**Criteria****For Initial Authorization:**

1. Please provide all of the following:

- A. Diagnosis: _____
- B. A patient-specific, clinically significant reason why the member cannot use Alimta® (pemetrexed; J9305), pemetrexed ditromethamine (J9323), and other preferred pemetrexed 25mg/mL solution products (J9294 - Hospira, J9296 - Accord, J9297 - Sandoz, J9314 - Teva, J9322 - Bluepoint) that do not require prior authorization:

Additional Information: _____

For Continued Authorization:

1. Date of last dose: _____
2. Does patient have any evidence of progressive disease while on pemetrexed therapy? Yes ☐ No ☐
3. Has the member experienced any adverse drug reactions related to pemetrexed therapy? Yes ☐ No ☐

If yes, please specify adverse reactions: _____

Additional Information: _____

Prescriber Signature: _____ **Date:** _____***I certify that the indicated treatment is medically necessary and all information is true and correct to the best of my knowledge.****Please do not send in chart notes. Specific information will be requested if necessary. Failure to complete this form in full will result in processing delays.***CONFIDENTIALITY NOTICE**

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Fax completed prior authorization request form to 888-601-8461 or submit Electronic Prior Authorization through CoverMyMeds® or SureScripts.

All requested data must be provided. Incomplete forms or forms without the chart notes will be returned. Pharmacy Coverage Guidelines are available at AetnaBetterHealth.com/Oklahoma.