



## Medicare Part D Coverage Determination Request Form

### This form is being used for:

Check one:  Initial Request  Continuation of Therapy/Renewal Request

Reason for request (*check all that apply*):  Prior Authorization  Formulary Exception  Quantity Exception

Compound Formulary Exception  Copay Tier Exception  Other (*please specify*): \_\_\_\_\_

### Patient Information

Patient Name: \_\_\_\_\_ DOB: \_\_\_\_\_

Drug Allergies: \_\_\_\_\_ Height/Weight: \_\_\_\_\_ Gender:  Male  Female

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Member ID #: \_\_\_\_\_ Plan Name: \_\_\_\_\_

### Prescriber Information

Prescribing Clinician: \_\_\_\_\_ Office Phone #: \_\_\_\_\_

Specialty: \_\_\_\_\_ Office Secure Fax #: \_\_\_\_\_

NPI #: \_\_\_\_\_ DEA/xDEA: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Contact Person (if different than provider): \_\_\_\_\_

Prescriber's or Authorized Representative Signature: \_\_\_\_\_

Date: \_\_\_\_\_

### Medication Information

Medication Being Requested: \_\_\_\_\_

Strength: \_\_\_\_\_ Quantity: \_\_\_\_\_ Directions: \_\_\_\_\_

Diagnosis related to this request: \_\_\_\_\_

ICD Code(s): \_\_\_\_\_

If applicable, does the prescriber acknowledge or is aware that The American Geriatrics Society (AGS) considers the requested medication to be of high risk for patients 65 years old or older?  Yes  No

Is the patient currently enrolled in HOSPICE?  Yes  No

### Previous Therapies Tried and/or Failed

Drug Name	Strength	Dates of Use	Description of Adverse Reaction or Failure

Additional information related to this request (lab values, non-pharmacologic therapies, contraindications, explanations for exceptions, etc):

By checking this box, I attest this is an *urgent case*, meaning that an expedited determination is necessary to prevent serious threat to life, limb, or eyesight; or threatens the body's ability to regain maximum function; or is needed to manage severe pain.

Information on this form is protected Health Information and subject to all privacy and security regulations under HIPAA