



Please complete ALL information below and fax your request to 1-888-671-5285

Entyvio® Prior Authorization Request Form

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Member Information (required) Provider Information (required)

Member Name:			Provider Name:		
Insurance ID#:			NPI#:	Specialty:	
Date of Birth:			Office Phone:		
Street Address:			Office Fax:		
City:	State:	Zip:	Office Street Address:		
Phone:			City:	State:	Zip:

Medication Information (required)

Medication Name:		Strength:	Dosage Form:
<input type="checkbox"/> Check if generic substitution is acceptable		Directions for Use:	
<input type="checkbox"/> Check if request is for continuation of therapy			

Clinical Information (required)

Select the diagnosis below:

- Moderately to severely active Crohn's disease
- Moderately to severely active ulcerative colitis
- Other diagnosis: _____ ICD-10 Code(s): _____

Clinical Information:

Select if the patient has had trial and failure, contraindication, or intolerance to the following conventional therapies, as appropriate for the patient's diagnosis:

- 6-mercaptopurine (Purinethol)
- Aminosaliclates (e.g., mesalamine [Asacol, Pentasa, Rowasa], osalazine [Dipentum], sulfasalazine [Azulfidine, Sulfazine])
- Azathioprine (Imuran)
- Corticosteroids (e.g., prednisone, methylprednisolone)
- Methotrexate (Rheumatrex, Trexall)

Is Entyvio prescribed by or in consultation with a gastroenterologist? Yes No

Has the patient had trial and failure, contraindication, or intolerance to one TNF inhibitor (e.g., Humira [adalimumab], Remicade [infliximab])? Yes No

Will Entyvio be used in combination with Tysabri (natalizumab)? Yes No

Will Entyvio be used in combination with a TNF inhibitor (e.g., Enbrel [etanercept], Humira [adalimumab], Cimzia [certolizumab], Simponi [golimumab], Remicade [infliximab])? Yes No

Reauthorization:

If this is a reauthorization request, answer the following questions:

Is there documentation the patient has had a positive clinical response to Entyvio therapy? Yes No

Will Entyvio be used in combination with Tysabri (natalizumab)? Yes No

Will Entyvio be used in combination with a TNF inhibitor (e.g., Enbrel [etanercept], Humira [adalimumab], Cimzia [certolizumab], Simponi [golimumab], Remicade [infliximab])? Yes No

Are there any other comments, diagnoses, symptoms, medications tried or failed, and/or any other information the physician feels is important to this review?

Please note: This request may be denied unless all required information is received.

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