

Ticket #: \_\_\_\_\_

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

Request Time: \_\_\_\_\_

## PHYSICIAN CERTIFICATION PRIOR AUTHORIZATION FORM

A request for the patient identified below has been made for the dispensing of **Xyrem**<sup>®</sup> sodium oxybate. Based on recent clinical information, we require more information before this prescription can be paid by the patient's health benefit plan. Please fill out the following information and return to us as indicated below:

A. Member Information								
Patient Name:		Plan Name/Plan ID:						
Patient ID:		Patient Date of Birth:		Patient	Patient Contact Phone #:			
B. Physician Information								
Physician Name: Physicia		an Address:						
Physician DEA #:	Physician Phone #:			Physician Fax #:				
Drug Name and Strength:	Direction (SIG):			QTY and Days Supply:				
C. Pharmacy Information								
Pharmacy Name:	NABP #: Pt		armacy Phone	y Phone #:		acy Fax #:		
D. Clinical Information (Please fill out the following information: circle all that apply)								
1. Is the prescriber enrolled in the Xyrem Success Program?						YES	NO	
2. Does the patient have a diagnosis of narcolepsy with cataplexy?						YES	NO	
3. Is the patient being treated with sedative hypnotics?						YES	NO	
4. Does the patient have a deficiency of succinic semialdehyde dehydrogenase?						YES	NO	
5. Is the total daily dose greater than 9 grams/day?						YES	NO	
<u>Duration of Approval</u> : One month supply – initial prescription Maximum of 3 months supply – subsequent prescriptions								
Authorized Medical Signature:								
Telephone:				Date:				

## When Completed Return To:

MC-Rx Clinical Division, 1267 Professional Parkway, Gainesville, GA 30507 1-866-965-Drug (3784) / Fax # 866-999-7736

\*\*Please note that this form is to be completed by the prescribing physician. This form and its contents are permissible under HIPAA as the protected health information (PHI) contained in this letter is only being used for purposes related to the provision of treatment, payment and healthcare operations (TPO). HIPAA does restrict the communication of PHI with providers for TPO related purposes.