

UPMC Health Plan

Rescula, Travoprost (Travatan), Travatan Z, Zioptan

Prior Authorization Form

IF THIS IS AN URGENT REQUEST, please call UPMC Health Plan Pharmacy Services.

Otherwise please return completed form to:

UPMC HEALTH PLAN PHARMACY SERVICES PHONE 800-979-UPMC (8762)

FAX 412-454-7722

PLEASE TYPE OR PRINT NEATLY.

Incomplete responses may delay this request.

Office contact:		Provider specialty:			
Provider first name		Provider last name:			
Provider phone #:		Provider fax #:			
Patient name:		Patient UPMC Health Plan Member ID #:		Patient DOB:	Patient age:
Drug requested: <input type="checkbox"/> Brand <input type="checkbox"/> Generic		Strength:	Frequency:		Quantity dispensed (including units):
<i>Generic equivalent drugs will be substituted for brand-name drugs unless you specifically indicate otherwise.</i>					
<input type="checkbox"/> New medication		If ongoing, please provide start date:		If ongoing, did the member show improvement while on therapy?	
<input type="checkbox"/> Ongoing medication				<input type="checkbox"/> Yes <input type="checkbox"/> No	
Diagnosis:					
Please indicate place of administration		<input type="checkbox"/> Physician office <input type="checkbox"/> Hospital/Clinic <input type="checkbox"/> Patient home		Will the medication be (select one):	
Please provide hospital/facility name and address:				<input type="checkbox"/> Billed directly by the provider via JCODE JCODE: _____	
				<input type="checkbox"/> Billed by a pharmacy and delivered to the provider <input type="checkbox"/> Billed by a pharmacy and delivered to the patient	
Medical History					
Has the member previously tried and latanoprost (Xalatan)?					<input type="checkbox"/> Yes <input type="checkbox"/> No
If yes, please provide reason for discontinuation:					
Please list all medications the member has previously tried or is currently using.					
Medication Name	Strength	Frequency	Start date	End date	Reason for failure or discontinuation
Please provide any additional information which should be considered in the space below:					