

**INDIANA HEALTH COVERAGE PROGRAMS PHARMACY BENEFIT
PBM CALL CENTER PRIOR AUTHORIZATION REQUEST FORM**



Pharmacy Benefit Management (PBM) Call Center
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Indianapolis, IN 46203
Phone: (866) 879-0106 Fax: (866) 780-2198



Note: This form is for all dosage forms of Carafate® (sucralfate) and Cytotec® (misoprostol) only. This form must be completed by the prescribing provider.

Today's Date
 / /

****All sections must be completed or the request will be returned****

Patient's Medicaid #	<input type="text"/>	Date of Birth	<input type="text"/> / <input type="text"/> / <input type="text"/>
Patient's Name	Prescriber's Name		
Prescriber's IN License #	<input type="text"/>	Specialty	
Prescriber's NPI #	<input type="text"/>	Prescriber's Signature	
Return Fax #	<input type="text"/> - <input type="text"/> - <input type="text"/>	Return Phone #	<input type="text"/> - <input type="text"/> - <input type="text"/>

Requested Medication	Strength	Quantity	Dosage Regimen	Diagnosis

Please check all that apply:

Carafate® (sucralfate)

Maintenance doses of Carafate® (sucralfate) tablets of 1 gram, twice daily do not require prior authorization

- This medication is being used to treat open wounds (i.e. Ulcer) within the GI tract
- This medication is not being prescribed concurrently with other peptic acid drugs beyond an initial 30-day period
- This medication is not being used to treat GERD

Cytotec® (misoprostol)

- This medication is being used for the prevention of side effects associated with use of NSAIDs
- This medication is not being prescribed concurrently with other peptic acid drugs
- The patient's risk score, based upon the GI Risk Rating Scale (found on following page) is ≥ 13 points

GI Risk Rating Scale	
Patient's Risk Criteria – Respond to ALL of the following five questions	Patient's Points
What is the patient's current health status? No restrictions of ability to perform normal activities = 0 points Moderate restriction, but with an ability to perform most activities of daily living and occupation = 1 point Marked restrictions, with an inability to perform most activities of daily living and occupation = 2 points Incapacitation with confinement to bed or wheelchair = 3 points	
How frequent has the patient experienced NSAID induced GI side effects? Never = 0 points Occasional = 4 points Frequent = 5 points	
Is the patient currently using NSAIDs? No = 0 points Yes = 1 point	
Is the patient taking concurrent oral steroids? No = 0 points Yes = 4 points	
What is the patient's age? < 25 years = 0 points 25-30 years = 1 point 31-35 years = 2 points 36-40 years = 3 points 41-45 years = 4 points 46-50 years = 5 points 51-55 years = 6 points 56-60 years = 7 points ≥ 61 = 8 points	
SUM OF POINTS	

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