ProCare Rx

Maxalt® rizatriptan

Ticket #: _____ Request Date: _____ Request Time: _____

PHYSICIAN CERTIFICATION PRIOR AUTHORIZATION FORM

A request for the patient identified below has been made for the dispensing of Maxalt® rizatriptan. 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 Contact Phone #:

B. Physician Information		
Physician Name:	Physician Address:	
Physician DEA #:	Physician Phone #:	Physician Fax #:
Drug Name and Strength:	QTY and Days Supply:	NDC # and GCN:

C. Pharmacy Information			
Pharmacy Name:	NABP #:	Pharmacy Phone #:	Pharmacy Fax #:

D. Clinical Information (Please fill out the following information: circle all that apply)

1. Is patient at least 18 years of age? YES NO
2. What is the patient's current diagnosis?
   - ☐ Migraine with or without aura
   - ☐ Cluster headaches
   - ☐ Hemiplegic or basilar migraine
3. Is patient currently taking any of the following medications? YES NO
   - ☐ Dihydroergotamine
   - ☐ Methysergide
   - ☐ MAOI
4. Does patient have any of the following conditions? YES NO
   - ☐ Ischemic heart disease (angina pectoris, history of MI, strokes)
   - ☐ Uncontrolled hypertension
   - ☐ Ischemic bowel disease

Dosing Guidelines: 5-10mg PO once, may repeat at intervals of at least 2 hrs; max 30mg/day. The safety of treating an average of more than 4 headaches in a 30-day period has not been established.

Authorized Medical Signature:	
Telephone:	Date:

When Completed Return To:

ProCare PBM 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.