Excellus

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REQUEST FOR DRUG EVALUATION
Medicare D—Lidocaine (Lidoderm™) Patch Flector™ Patch
FAX: 1-800-956-2397

Please complete all of the following information:

Patient Name: (Please Print)	**Patient Phone #:**
Patient ID number:	**Patient Birthdate:**
MD Name:	**MD Specialty:**
MD Phone #: ( )	**MD FAX #: ( )**
MD DEA #:	**MD NPI #:**

1. Requested drug information:

Drug Name	Strength	Quantity	Directions for use

□ **New Start** □ **Continued Therapy** **Start Date:** _____

The definition of a **medically-accepted indication** is listed in Chapter 6 (Part D Drugs and Formulary Requirements) Section 10.6 of the Medicare Prescription Drug Benefit Manual: "Section 1860D-2(e)(1)(B) of the Act limits "medically-accepted indication," by reference to section 1927(k)(6) of the Act, to any use of a covered Part D drug which is approved under the Federal Food, Drug, and Cosmetic Act, or the use of which is supported by one or more citations included or approved for inclusion in any of the compendia described in section 1927(g)(1)(B)(i) of the Act. The compendia are: I. American Hospital Formulary Service Drug Information, II. DRUGDEX Information System, and III. United States Pharmacopeia-Drug Information (or its successor publications).

A) **For lidocaine (Lidoderm™) patch requests**, what is your patient's diagnosis?

1) Post-herpetic neuralgia (PHN)? □ **YES** □ **NO**
2) Diabetic peripheral neuropathy? □ **YES** □ **NO**
3) Other? Please specify: _____

B) **For Flector™ patch requests:** What is your patient's diagnosis?

1) Acute pain (less than 3 months) due to minor strains, sprains, and contusions? □ **YES** □ **NO**
2) Other? Please specify: _____

I certify that the above information is true and accurate to the best of my knowledge. **To avoid processing delays, please add your electronic signature below or print this document and provide your handwritten signature.**

Prescriber Signature_____**Date**_____

Please call for assistance completing this form at: 1-800-499-1275
Pharmacy Help Desk at (Fax): 1-800-956-2397
Urgent Requests Only (Fax): 1-800-208-4050

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