# Molina Healthcare of Idaho
# Synagis 2021-2022
# Prior Authorization Form

Phone: (844) 239-4914
Fax: (844) 312-6407

| | |
|---|---|
| Date: | Patient DOB: |
| Patient Name: | Patient Gestational Age at Birth: |
| Patient Medicaid ID#: | Provider Phone: |
| Provider Name: | Provider Address: |
| Provider Phone: | Provider Fax: |
| Signature of Provider: | Date: |

Molina Healthcare authorizes Synagis™ (palivizumab) based on American Academy of Pediatrics (AAP) criteria. CVS Caremark Specialty Pharmacy will be the exclusive provider for all Synagis™ requests for your Molina patients. CVS Caremark Specialty Pharmacy will be performing enrollment functions once treatment authorization is given by Molina. Synagis™ will in turn be shipped by CVS Caremark Specialty Pharmacy . If you have questions about the Synagis™ distribution, please call Molina at (844) 239-4914. The timing of season will be determined by annual virology reporting. Please note that depending on where the child fits within AAP criteria, the total number of doses allowed during the season may vary (see notes below). *As defined by The National Respiratory and Enteric Virus Surveillance System (NREVSS): RSV season is over when virology is < 10% for 2 consecutive weeks*

**For dose requests outside of above season: provider must submit**

- Letter of Medical Necessity (LMN)
- Current local virology information showing virology > 10% for most recent two consecutive weeks

***Please see Notes section for 2021-2022 season and refer state guidance, if applicable**

**Synagis™ is medically necessary when documentation shows one of the following criteria are met (please check the box that applies).**

**Please note how the patient meets AAP criteria below and include:**

- **Medical documentation supporting selection below**
- **Documentation of patient's Gestational Age at birth**

**1. Early Preterm Infant:**

- ☐ Born before 29 weeks, 0 days' gestation and younger than 12 months of age at the start of respiratory syncytial virus (RSV) season.

**2. Chronic Lung Disease of Prematurity (bronchopulmonary dysplasia):**

- ☐ Younger than 12 months of age at the start of RSV season with chronic lung disease of prematurity - defined as birth before 32 weeks, 0 days' gestation AND a requirement for greater than 21% oxygen for at least 28 days after birth
- ☐ Younger than 24 months of age with chronic lung disease of prematurity-defined as birth before 32 weeks, 0 days' gestation AND a requirement for greater than 21% oxygen for at least 28 days after birth AND continues to require medical intervention (e.g., supplemental oxygen, chronic corticosteroid, or diuretic therapy) within the 6-month period before the child's second RSV season

**3. Hemodynamically Significant Congenital Heart Disease:**

- ☐ Younger than 12 months of age at the start of RSV season with hemodynamically significant CHD (Check ONE):
  - ☐ Acyanotic heart disease, will require cardiac surgical procedures, AND receiving medication for congestive heart failure (CHF).
  - ☐ Moderate to severe pulmonary hypertension.
  - ☐ Cyanotic heart disease, on cardiologist recommendation (e.g., Transposition of the great arteries, Tetralogy of Fallot, etc.)

Please note: SynagisTM is considered not medically necessary for infants and children with hemodynamically insignificant heart disease (e.g., mild or surgically corrected condition that does not require medical therapy, secundum atrial septal defect, patent ductus arteriosis, etc.)

**4. Anatomic Pulmonary Abnormality or Neuromuscular Disorder:**

- ☐ Younger than 12 months of age at the start of RSV season with qualifying disease that impairs the ability to swallow/cough/clear secretions from the airways

**5. Profound immunocompromised status:**

- ☐ Younger than 24 months of age at the start of RSV season and profoundly immunocompromised during the RSV season (e.g., acute myeloid or lymphocytic leukemia, chemotherapy, solid organ or stem cell transplant, severe combined immunodeficiency, severe acquired immunodeficiency, etc.)

**6. Cardiac Transplant:**

- ☐ Younger than 24 months of age at the start of RSV season and has undergone or will undergo cardiac transplantation during the current RSV season.

**Please note the following:**

- Synagis™ is NOT recommended for infants with cystic fibrosis or Down syndrome unless other indications are also present
- Clinicians may administer up to a maximum of 5 monthly doses of palivizumab (15 mg/kg per dose) during the RSV season to infants who qualify for prophylaxis
- Qualifying infants born during the RSV season may require fewer doses. For example, infants born in January would receive their last dose in March or April, depending on the end of the season. For dose requests outside of the RSV season the provider must submit a letter of medical necessity AND current local virology information showing virology > 10% for the most recent two consecutive weeks
- Monthly prophylaxis should be discontinued in any child who experiences a breakthrough RSV hospitalization
- Coverage for services, procedures, medical devices and drugs are dependent upon benefit eligibility as outlined in the member's specific benefit plan. This Coverage Guideline must be read in its entirety to determine coverage eligibility, if any. This Coverage Guideline provides information related to coverage determinations only and does not imply that a service or treatment is clinically appropriate or inappropriate. The provider and the member are responsible for all decisions regarding the appropriateness of care. Providers should provide Molina Healthcare complete medical rationale when requesting any exceptions to these guidelines
- ***NOTE: For the 2021-2022 season: Due to the atypical inter-seasonal change in RSV epidemiology, American Academy of Pediatrics strongly supports consideration for use of palivizumab in eligible members outside of the typically recommended schedule. This recommendation applies to regions experiencing high rates of RSV circulation, consistent with a typical fall-winter season. https://www.aap.org/en/pages/2019-novel-coronavirus-covid-19-infections/clinical-guidance/interim-guidance-for-use-of-palivizumab-prophylaxis-to-prevent-hospitalization/