



TIPS FOR PRIOR AUTHORIZATIONS, FORMULARY EXCEPTIONS, AND APPEALS: ANSWERING KEY QUESTIONS

Every insurance plan is different. Coverage determinations are individualized and based upon the patient's clinical history, relevant testing, and your independent medical evaluation of the patient.

Contact your Therapy Access Manager from Johnson & Johnson for information about plan-specific policies and coverage criteria, or if any further assistance is needed.

IMPORTANT QUESTIONS FOR COVERAGE DETERMINATION:

- *What is the patient's diagnosis?*
- *Does the patient have comorbidities?*
- *What is the patient's WHO Group?*
- *What is the patient's WHO Functional Class?*
- *What diagnostic tests have been performed to confirm this diagnosis?*
 - *Was a right-heart catheterization (RHC) test performed? If not, why?*
 - *Was vasoreactivity testing performed?*
 - *Has the patient had recent lab tests (HGB/HCT, LFTs, BNP, pregnancy test)?*
- *What are the patient's clinical symptoms?*
- *Which pulmonary arterial hypertension (PAH) medicines are currently being prescribed?*
 - *Soluble guanylate cyclase stimulators (sGCs)*
 - *Phosphodiesterase type 5 inhibitors (PDE5is)*
 - *Endothelin receptor antagonists (ERAs)*
 - *PDE5i and ERA combination therapy*
 - *Prostacyclin pathway agents*
 - *Conventional therapies*
- *How is the patient responding to current PAH medicines?*
- *Has the patient's clinical status changed?*
- *Is the patient currently hospitalized? If recently discharged, list discharge date*
- *Which PAH medicines have been tried and failed, and what were the corresponding dates and reasons for failure? Does the patient have any contraindication(s) to preferred formulary medications?*
- *What is the clinical rationale for not choosing other PAH medicines on the formulary?*
- *What is the clinical rationale for the change in the patient's treatment plan?*
- *What is the clinical rationale for choosing the requested PAH medicine?*

The questions above highlight items and information that may be needed to obtain a coverage decision from an insurer; the list is neither medical guidance nor a suggestion that you submit an appeal. The information provided on this list is general in nature and is not intended to be conclusive or exhaustive. As the patient's healthcare provider, you are responsible for applying your clinical judgment regarding appropriate care and treatment of each patient.

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