



Humana – CareSource®
P.O. Box 221529
Louisville, KY 40252

Diabetes Test Strips Prior Authorization Request Form

PHARMACY FAX # 866-930-0019

Note: Prior Authorization Requests without clinical justification or previous products noted will be considered INCOMPLETE; illegible or incomplete forms will be returned.

PATIENT INFORMATION

Patient Name		Date
Humana - CareSource ID	DOB	Gender: M/F
Medication Allergies		
Pharmacy	Pharmacy Phone	

PROVIDER INFORMATION

Prescriber Name	NPI #	DEA #
Prescriber Specialty	Prescriber Address	
Office Fax	Phone	Office Contact Name

PRODUCT REQUESTED

Non-preferred product requested	<input type="checkbox"/> Blood glucose meter (<i>name</i>)		
	<input type="checkbox"/> Blood glucose test strips (<i>name</i>)		
Directions	Quantity	Refills	

CLINICAL JUSTIFICATION*

1. Did the patient try all of the preferred products from the preferred manufacturer? <i>Check all that apply and submit supporting documentation.</i>			
<u>Freestyle Meters</u> <input type="checkbox"/> Freestyle Lite <input type="checkbox"/> Freestyle Freedom Lite <input type="checkbox"/> Freestyle Insulinx	<u>Freestyle Test Strips</u> <input type="checkbox"/> Freestyle Lite <input type="checkbox"/> Freestyle Freedom Lite <input type="checkbox"/> Freestyle Insulinx	<u>Other Meters</u> <input type="checkbox"/> Precision Xtra	<u>Other Test Strips</u> <input type="checkbox"/> Precision Xtra
2. Why can't the patient use any of the preferred blood glucose meters and/or strips? (<i>Document reason(s) in the space provided and submit supporting documentation.</i>)			
3. If the request exceeds the quantity limits of 1 meter per 365 days and/or 6 strips per day, document reason(s) for exceeding the quantity limits in the space provided and <u>submit supporting documentation</u> .			

Provider Signature	Date
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***In order to process this request, please complete all boxes completely.**

This facsimile and any attached document are confidential and are intended for the use of the individual or entity to which it is addressed. If you have received this in error, please notify us by telephone immediately 1-855-852-7005.