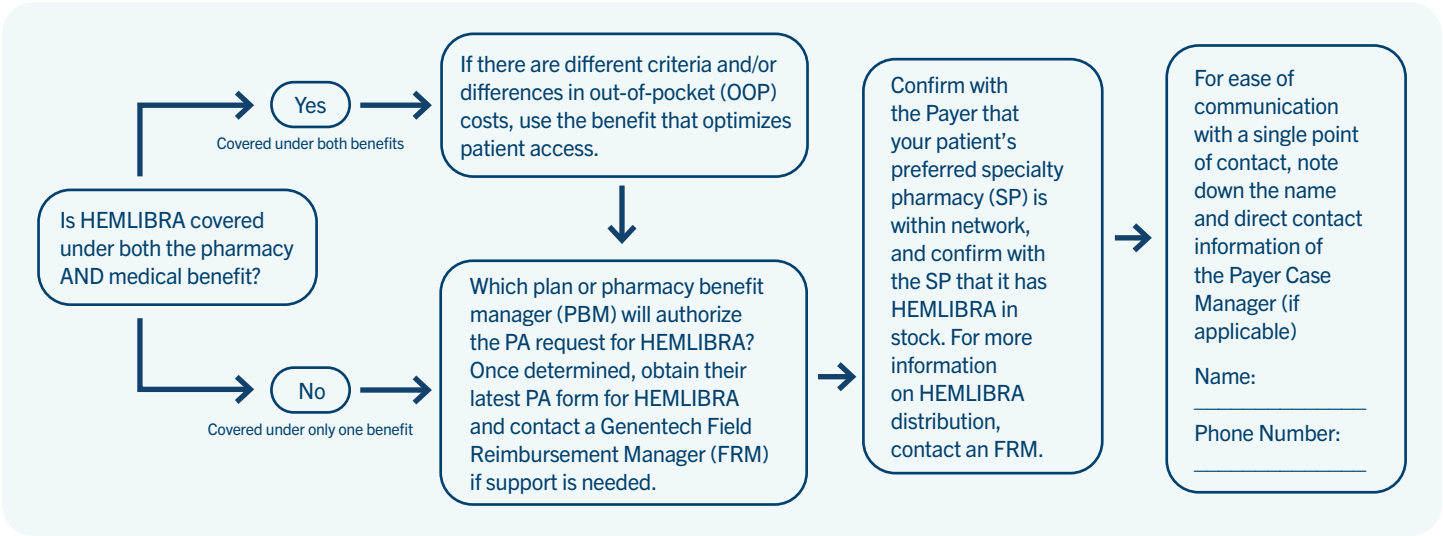


ACCESS PROCESS TIPS FOR HEMLIBRA® (emicizumab-kxwh)

Prior Authorization (PA) and Medical Necessity Worksheet

We know how important it is for your patients to get the Genentech medicine they are prescribed. If a PA is required, start by verifying which benefit HEMLIBRA is covered under by the patient's health plan.

PAYER COVERAGE TIPS



This worksheet can help you gather important information to include with the PA request for your patient and, in the case of medical denial, for an appeal submission. Payer requirements may differ, so it is important to confirm which requirements must be met for each patient's health insurance plan.

As best practice, submit additional clinical documentation (eg, patient medical records, laboratory test results, or proof of failed products) to substantiate medical necessity.

The completion and submission of coverage or reimbursement-related documentation are the responsibility of the patient, caregiver, and healthcare provider. Genentech makes no representation or guarantee concerning coverage or reimbursement for any service or item.

RECENT PATIENT MEDICAL HISTORY

Include chart notes or other documentation from the patient's medical records, if available, for any of the issues listed below.

IN THE PAST 6 MONTHS	
Inhibitor status:	
Current factor VIII (FVIII) or bypassing agent (BPA) product name, dosage strength, and dosing schedule (specify if prophylactic or on-demand):	
Any adjustments in prophylactic dosage strength and/or schedule:	
Any prophylactic doses administered in addition to the patient's usual dosing schedule:	

THIS IS A WORKSHEET ONLY.
DO NOT SUBMIT THIS FORM WITH THE PA REQUEST.

RECENT PATIENT MEDICAL HISTORY

Include chart notes or other documentation from the patient's medical records, if available, for any of the issues listed below.

IN THE PAST 12 MONTHS

Number of treated bleeds:	
Average dosage of FVIII/BPA required to control each bleed:	
Average number of doses used for each breakthrough bleed:	
Circumstances/events leading to the bleed(s):	
Total cost of breakthrough bleed treatment, if known:	
Number of emergency department (ED) visits, if known:	
Number of days hospitalized:	
Cost of ED visits and hospitalizations combined, from patient bills or Explanation of Benefits (EOBs), if available:	
Number of days of work or school missed in past year by the patient and their caregiver(s):	

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ASSESSMENT OF CURRENT PHYSICAL HEALTH

Include chart notes or other documentation from the patient's medical records, if available, for any of the issues listed below.

DISCUSS WITH YOUR PATIENT

Patient self-reported pain level (0=none; 10=severe):	
Description of pain (joints and/or other areas of the body affected; presence of swelling):	
Pain management medications (prescribed and over-the-counter):	
Patient-reported joint/orthopedic/mobility issues:	
Patient-reported limitations on activity level and related comorbidities resulting from decreased activity:	
Complications associated with venous access and/or port usage (eg, infections):	

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Genentech Access Solutions offers access and reimbursement support for your patients and practice.

Live customer support from dedicated Genentech Specialists is available Monday through Friday, from 6 AM–5 PM PT:
866-4ACCESS (866-422-2377).

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