OKLAHOMA Health Care Authority

State of Oklahoma SoonerCare
Krazati® (Adagrasib) Prior Authorization Form

SoonerSelect | aetna

Member Name:_____ ***Date of Birth:***_____ ***Member ID#:***_____

Drug Information

Pharmacy Billing (NDC:_____***) Start Date (or date of next dose):***_____

Dose:_____ ***Regimen:***_____

Billing Provider Information

Pharmacy NPI:_____ ***Pharmacy Name:***_____

Pharmacy Phone:_____ ***Pharmacy Fax:***_____

Prescriber Information

Prescriber NPI:_____ ***Prescriber Name:***_____

Prescriber Phone:_____ ***Prescriber Fax:***_____ ***Specialty:***_____

Criteria

For Initial Authorization:

1. **Please indicate the diagnosis and information:**

☐ **Non-Small Cell Lung Cancer (NSCLC)**

A. Is diagnosis recurrent, advanced, or metastatic NSCLC? Yes☐ No☐
B. Is there the presence of KRAS G12C mutation in tumor or plasma specimen as determined by an FDA approved test? Yes☐ No☐
C. Has the member received at least 1 prior systemic therapy? Yes☐ No☐
D. Will adagrasib be used as a single agent? Yes☐ No☐

☐ **If diagnosis is not listed above, please indicate diagnosis:**_____

Additional Information:_____

_____

For Continued Authorization:

1. Date of last dose:_____
2. Does the member have any evidence of progressive disease while on adagrasib? Yes☐ No☐
3. Has the member experienced adverse drug reactions related to adagrasib therapy? Yes☐ No☐

*If yes, please specify adverse reactions:*_____

_____

Additional Information:_____

_____

Prescriber Signature:_____ **Date:**_____

I certify that the indicated treatment is medically necessary and all information is true and correct to the best of my knowledge. *Failure to complete this form in full will result in processing delays.*

Fax completed prior authorization request form to **888-601-8461** or submit Electronic Prior Authorization through CoverMyMeds® or SureScripts. All requested data must be provided. Incomplete forms or forms without the chart notes will be returned. Pharmacy Coverage Guidelines are available at **AetnaBetterHealth.com/Oklahoma.**	