State of Maine Department of Health & Human Services
MaineCare/MEDEL Prior Authorization Form RSV

Phone: 1-888-445-0497 www.mainecarepdl.org Fax: 1-888-879-6938

Member ID #: |__|__|__|__|__|__|__|__|__|__| Patient Name: _____ DOB: _____
(NOT MEDICARE NUMBER)

Patient Address:_____

Provider DEA: |__|__|__|__|__|__|__|__|__| Provider NPI: __|__|__|__|__|__|__|__|__|__|

Provider Name:_____ Phone:_____

Provider Address:_____ Fax:_____

Pharmacy Name:_____Rx Address:_____Rx phone:_____

Provider must fill all information above. It must be legible, correct, and complete or form will be returned.

(Pharmacy use only): NPI: | | | | | | | | | | NABP: | | | | | | | NDC: | | | | | | | | | | |

Nirsevimab (Beyfortus™), a long-acting monoclonal antibody, manufactured by Sanofi and AstraZeneca, is available to order through the Maine Vaccine for Children Program. Nirsevimab is recommended for infants ages birth to 8 months from October 1st to March 31st and high-risk infants, ages 8 months to 19 months per CDC guidance.

Drug Name	Strength	Weight (kg)	Dosage Instructions	Quantity	Days Supply
Synagis®	☐**50mg** ☐**100mg**	_____	_____	_____	30

PA requests may be approved starting at the onset of RSV season for a maximum of 5 doses and a dosing interval not less than 30 days between injections. PA requests will be accepted starting November 1, 2024, for dates of administration starting November 11 ,2024. Synagis® dosing authorizations will extend for the recommended number of doses or until the end of epidemic RSV season as defined by CDC - whichever occurs first. Monthly prophylaxis should be discontinued for any infant or young child who experiences a breakthrough RSV hospitalization or if a child receives Nirsevimab (Beyfortus™).

BEYFORTUS™ ATTESTATION

❑ The member has not already received Nirsevimab (Beyfortus™) for the current RSV season. Note: Concomitant use with Nirsevimab (Beyfortus™) will not be approved.

Medical Necessity Documentation (Please check one of the following):

Chronic Lung Disease

❑ Infants who are 12 months of age or younger with **chronic lung disease (CLD)** of prematurity, defined as born at < 32 weeks, 0 days, AND a requirement for > 21% oxygen for at least the first 28 days after birth.

- ❑ Infants who are 12 months of age or younger, born prior to 35 weeks, 0 days AND who required intensive pulmonary services during the neonatal period AND continue to require chronic medication therapy for their neonatal based pulmonary issues.

- ❑ Infants who are 24 months or age or younger who meet the above criteria for CLD AND who **currently require** or **have required medical therapy** (oxygen, diuretics, corticosteroids) within 6 months of the start of the RSV season.

Congenital Heart Disease

- ❑ Infants who are 12 months of age or younger with **hemodynamically significant congenital heart disease** and have one or more of the following:
    a. Acyanotic heart disease with medication to control congestive heart failure AND will require surgery.
    b. Moderate to severe pulmonary hypertension
    c. Cyanotic heart disease with palivizumab prophylaxis recommended by a pediatric cardiologist.

- ❑ Infants who are 24 months of age or younger who undergo cardiac transplantation during the RSV season.

Congenital abnormalities of the airway or neuromuscular disease

- ❑ Infants who are 12 months of age or younger at the start of RSV season and have either severe neuromuscular disease or congenital abnormalities, either of which compromise handling of respiratory secretions.

Cystic fibrosis with other qualifying indications

- ❑ Infants who are 12-24 months of age at the start of the RSV season with cystic fibrosis and manifestations of severe lung disease (previous hospitalization for pulmonary exacerbation in the first year or abnormalities on chest radiography or CT, which persists when stable) or weight for length less than the 10^{th} percentile.

Immunocompromised children < 24 months of age

- ❑ Infants who are less than 24 months at the start of RSV season who will be profoundly immunocompromised (e.g., receiving chemotherapy, recipients of solid organ transplants or hematopoietic stem cell transplants) during the RSV season.

- ❑ Infants less than 12 months of age or younger at the start of the RSV season with cystic fibrosis AND with clinical evidence of CLD and/or nutritional compromise

Prematurity

- ❑ Infants who are 12 months of age or younger at the start of the RSV season **born at ≤ 28 weeks, 6 days gestational age**.

- ❑ Other: _____

Provider Signature: _____ Date of Submission_____

***MUST MATCH PROVIDER LISTED ABOVE**

Pursuant to the MaineCare Benefits Manual, Chapter I, Section 1.16, The Department regards adequate clinical records as essential for the delivery of quality care, such comprehensive records are key documents for post payment review. Your authorization certifies that the above request is medically necessary, meets the MaineCare criteria for prior authorization, does not exceed the medical needs of the member and is supported in your medical records. American Academy of Pediatrics. Respiratory Syncytial Virus. In: Pickering LK, Baker CJ, Kimberlin DW, Long SS, eds. Red Book: 2009 Report of the Committee on Infectious Diseases. 28thed. Elk Grove Village, IL: American Academy of Pediatrics; 2009:560-569. Website: http://aapredbook.aappublications.org/cgi/content/full/2009/1/3.110.