P.O. Box 30192
Salt Lake City, UT 84130-0192
801-442-4912 or 800-442-3129
Fax 801-442-3006

selecthealth℠

PREAUTHORIZATION FORM

Avastin®
(bevacizumab)

Therapeutic use: Avastin is a monoclonal antibody which binds to vascular endothelial growth factor (VEGF) and is approved for treatment of multiple cancer types

Quantity Limit:

- Colorectal: 12 doses per 180 days (10 mg/kg IV infusion every 14 days)
- NSCLC: 9 doses per 180 days (15 mg/kg IV infusion every 21 days)
- Glioblastoma: 12 doses per 180 days (10mg/kg IV infusion every 14 days)
- RCC: 12 doses per 180 days (10mg/kg IV infusion every 14 days)

Authorization Period: 12 months

Patient's name _____

Patient's ID# ☐☐☐ ☐☐ ☐☐☐☐ DOB ☐☐/☐☐/☐☐☐☐

ICD-9 ☐☐☐ ☐☐ ☐☐☐ ☐☐ _____

Physician's name_____

Physician's Ph# (☐☐☐) ☐☐☐-☐☐☐☐ Fax# ☐☐☐-☐☐☐☐

Physician's signature_____ Date signed ☐☐/☐☐/☐☐☐☐

Supervising Physician's name_____ (Required if requesting provider is a nurse practitioner or physician assistant)

Please check "Yes" or "No" and respond to the following requests:			
1.	Does the patient have metastatic cancer of the colon or rectum?	❑ Yes	❑ No
1a.	Is Avastin being used in combination with 5-Flurouracil?	❑ Yes	❑ No
2.	Does the patient have NSCLC?	❑ Yes	❑ No
2a.	Is Avastin being used in combination with carboplatin/paclitaxel (CP) or erlotinib?	❑ Yes	❑ No
3.	Does the patient have glioblastoma multiforme of the brain?	❑ Yes	❑ No
3a.	Has the patient shown resistance or intolerance to prior therapy with temozolomide?	❑ Yes	❑ No
4.	Does the patient have metastatic renal cell carcinoma (mRCC)?	❑ Yes	❑ No
4a.	Is Avastin being used in combination with interferon alpha?	❑ Yes	❑ No
Important Note: Avastin should not be used until 28 days have elapsed since the patients last surgery and there is complete healing of the incision. Avastin for ocular use should be billed under C9257; this code does not require preauthorization.			

This form is intended for SelectHealth members only. All requests for preauthorization should be sent via fax to 1-801-442-3006. Missing, inaccurate, or incomplete information may cause a delay or denial of authorization.

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