

**PROTON PUMP INHIBITORS
QUANTITY OVERRIDE**

Patient name: _____ Medicaid ID #: _____

Prescriber Name: _____ Prescriber NPI#: _____ Contact person: _____

Prescriber Phone#: _____ Extension/Option: _____ Fax#: _____

Pharmacy: _____ Pharmacy Phone#: _____ Pharmacy Fax #: _____

Requested Medication: _____ Strength: _____ Frequency/Day: _____

Please fax documentation for progress notes and this form to 855-828-4992

All information to be legible, complete and correct or form will be returned

Hypersecretory Conditions: Proton Pump Inhibitors are generally FDA-approved for once daily dosing, and only indicated for twice daily dosing in specific cases of hypersecretory conditions or H. pylori infection.

- Please write the appropriate hypersecretory condition or H. pylori diagnostic code on the face of the prescription. Twice-daily dosing will be reimbursed at the pharmacy point of sale with no further intervention on your part.

Other Diagnosis: Peer-reviewed research has demonstrated that, in most cases, switching to a different PPI is as effective as doubling the dose of the original PPI. Also, counsel your patient to take their PPI 30min before breakfast – this regimen increases efficacy ten-fold. If twice daily dosing is desired, please provide the following:

- Evidence of failure on an appropriate dosing regimen.
- Consultation with a GI, ENT, pulmonary or allergy specialist.

Special Populations:

- Liquid and quick-dissolving tablets are available without PA to patients under 12 years old. An automatic PA will occur at the pharmacy point of sale.
- Liquid and quick-dissolving tablets are available to patients of any age with any type of feeding tube. Please indicate the tube type on your PA request.

Notes:

- No compounded solutions will be approved, including omeprazole/sodium bicarbonate.

AUTHORIZATION: 6 months

RE-AUTHORIZATION: 1 year, with an updated letter of medical necessity

07/29/2016

<http://health.utah.gov/medicaid/pharmacy>