



A Carelon Company

CROHN'S/ UC REFERRAL FORM

E-prescribe the *Fast & Easy* way: select **BioPlus** from your EHR!

Fax: 800-269-5493

Phone: 888-292-0744

bioplusrx.com

PATIENT INFORMATION

| | | | | | |
|-----------------|-------|-----------------|---------|--------|---------------------|
| Patient's Name: | | SSN: | | DOB: | |
| Address: | | City: | | State: | Zip: |
| Home Phone: | Cell: | Height: | Weight: | | Gender: Female Male |
| Email: | | Diagnosis Code: | | | |

INSURANCE INFORMATION (or attach copy of the cards)

| | | | | |
|----------------------|----------------|---------------|-----------|----------|
| Primary Insurance: | Policy Holder: | Relationship: | Policy #: | Group #: |
| Secondary Insurance: | Policy Holder: | Relationship: | Policy #: | Group #: |

PRESCRIPTION INFORMATION (for IV medication attach a copy of the prescription)

AMJEVITA™ (adalimumab-atto)

- SureClick 40 mg/0.8 mL Prefilled Syringe 20 mg/0.4 mL Prefilled Syringe 40 mg/0.8 mL
Induction: 160 mg SubQ Day 1
 4 x 40 mg SubQ in one day 2 x 40 mg SubQ per day for two consecutive days
 2 x 40 mg SubQ Day 15

Qty: 6 **Refills: 0**
Maintenance: 40 mg SubQ every other week
Qty: **Refills:**

CIMZIA® (certolizumab pegol)

- Prefilled Syringe Lyophilized Powder
Induction: 400 mg (2 x 200 mg) SubQ weeks 0, 2, 4
Qty: 28 day supply **Refills:** 0

Maintenance:
 2 x 200 mg SubQ every 4 weeks
 2 x 200 mg SubQ every 2 weeks
 200 mg SubQ every 2 weeks
Qty: 28 day supply **Refills:**

DUPIXENT® (dupilumab)

- Prefilled Syringe Pen
 200 mg/1.14 mL 300 mg/2 mL
 15 kg < 30 kg Inject 200 mg SubQ every other week
 30 kg < 40 kg Inject 300 mg SubQ every other week
 40 kg or more Inject 300 mg SubQ every week

Qty: 4 for 28 days **Refills:**

Entocort® (budesonide)

- 3 mg capsules
 9 mg PO daily
Qty: 90 **Refills:**

HUMIRA® (adalimumab)

- Pen Prefilled Syringe
 Citrate Free (CF) Original Formula
Induction:
 160 mg SubQ day 1, 80 mg SubQ day 15
 80 mg SubQ day 1, 80 mg SubQ day 2/ 80 mg SubQ day 15

Qty: 1 pack **Refills:** 0
Maintenance: 40 mg SubQ every other week
Qty: 28 day supply **Refills:**

**** If dosage form is not selected, PENS will be dispensed.****

OMVOH™ (minkizumab-mrkz)

- Vial 20 mg/mL Prefilled Syringe 100 mg/mL
IV Induction: Inject 300 mg IV at weeks 0, 4, 8
Qty: 1 **Refills:** 2
 Maintenance: 2 x 100 mg SubQ weeks 12 and every 4 weeks

Qty: 2 Prefilled Syringes **Refills:**

RINVOQ® (upadacitinib) extended-release tablets

- 15 mg 30 mg 45 mg
Induction:
 45 mg PO once daily for 8 weeks 45 mg PO once daily for 12 weeks

Qty: 2 bottles **Refills:** 0
Maintenance: _____ mg once daily
Qty: **Refills:**

IMMUNOSUPPRESSIVE INFUSION Biosimilar authorized

- AVSOLA® ENTYVIO® INFLECTRA® Infliximab REMICADE® RENFLEXIS®
Initial Dose: _____ mg/kg at week 0, 2, and 6 **Maintenance Dose:** _____ mg/kg every 8 weeks

| OTHER | STRENGTH: | SIG/DIRECTIONS: | REFILLS: | QUANTITY: |
|-------|-----------|-----------------|----------|-----------|
|-------|-----------|-----------------|----------|-----------|

As required by your state, Prescriber to check "Dispense as written" or handwrite "Brand Medically Necessary" and sign to prevent generic substitution.

Dispense as written

PHYSICIAN INFORMATION

Injection Training: Office to Instruct SP to Arrange Teaching

| | | |
|-------------------------|----------|---|
| Prescriber Name: | Phone: | Fax: |
| Office Contact: | Email: | |
| Address: | Ship To: | <input type="checkbox"/> Patient <input type="checkbox"/> MD Office |
| NPI #: | Tax ID#: | |
| Prescription Signature: | Date: | |

Your signature authorizes BioPlus Specialty Pharmacy Services, LLC, and their network of pharmacies, MedScripts Medical Pharmacy, River Medical Pharmacy, Route 300 Pharmacy, and Santa Barbara Specialty Pharmacy (the "BioPlus Pharmacies"), to act on your behalf to obtain prior authorization, including appeals and peer to peer reviews, for the prescribed medications. We will also pursue available copy and financial assistance on behalf of your patients.

BioPlus Specialty Pharmacy 376 Northlake Blvd., Altamonte Springs, FL 32701

BioPlus Specialty Pharmacy 13925 Yale Ave, Suite 145, Irvine, CA 92620

River Medical Pharmacy 4752 Research Drive, San Antonio, TX 78240

Santa Barbara Specialty Pharmacy 4690 Carpinteria Ave, Ste B, Carpinteria, CA 93013

BioPlus Specialty Pharmacy 100 Southcenter Ct., Suite 100, Morrisville, NC 27560

MedScripts Medical Pharmacy 1325 Miller Rd., Suite K, Greenville, SC 29607

Route 300 Pharmacy 1208 Route 300, Suite 103, Newburgh, NY 12550

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