



FAMILY HEALTH INITIATIVES

17P Supplemental Medication Request Form

Family Health Initiatives, Prematurity Prevention Initiative grant is funded by the New Jersey Department of Health, Division of Community Health Services, and has established funding for 17P weekly injections as well as funding for nursing visits to give the injections for women who are candidates for 17P but are either waiting for insurance approval or have been denied insurance approval or have no insurance coverage and does not meet Makena Cares criteria.

If you have patients who need funding for Makena, please fill out this form and we can assist with funding. **Please fax to: 855-413-0144.**

For any additional questions about this funding opportunity, please email Sherolde Hackett at shackett@fhiworks.org or contact by phone at (609) 828-9973.

Patient Information

Date ___/___/___ Date of Birth ___/___/___

First Name _____ Last Name _____

Address _____ City _____

Zip Code _____ Primary Phone ____-____-____

Race

African American Multi-Racial Caucasian Alaskan/Pacific Islander

Asian Native American Other _____

Insurance Information

Health Insurance

Medicaid PE NJ Family Care Medicaid FFS Medicaid MCO Medicare

Commercial/Private Uninsured/Self-Pay

Medicaid MCO

None Horizon NJ Health Aetna Better Health United Healthcare Amerigroup

Wellcare

Reason Assistance Requested

Insurance denied coverage Uninsured and not eligible for Makena Cares

Reason for delay/denial

Prior Authorization decision delay Late to Care - Gestational Age
 Lapse in Insurance *Explain lapse* *Other: Explain* _____

Provider Information

Provider Name _____ Provider NPI _____
Office Address _____ City _____ Zip Code _____
Office Phone _____-_____-_____ Office Fax _____-_____-_____
Staff Completing Form: First Name _____ Last Name _____

Date received by KabaFusion ____/____/____ Tech Name _____
of vials currently available _____ Date approved by FHI ____/____/____ Denied by FHI Yes No

Reason Denied

Patient enrolled MMCO coverage
 Does not meet diagnostic guidelines for prenatal therapy
 Another form of coverage available and not pursued
 Other reason _____