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CAREFIRST - ANNE ARUNDEL COUNTY PUBLIC SCHOOLS (AACPS)
Tetracycline Capsules Limit - Post PA

This fax machine is located in a secure location as required by HIPAA regulations. Fax complete signed and dated forms to CVS/Caremark at 888-836-0730. Please contact CVS/Caremark at 800-294-5979 with questions regarding the prior authorization process. When conditions are met, we will authorize the coverage of Tetracycline Capsules Limit - Post PA.

Patient Name: _____ **Date:** 8/25/2025
Patient ID: _____ **Patient Date Of Birth:** _____
Patient Group No: _____ **Patient Phone:** _____ **Physician Name:** _____
NPI#: _____ **Specialty:** _____
Physician Office Telephone: _____
Physician Office Address: _____

Drug Name (select from list of drugs shown)

Tetracycline 250mg Capsules Tetracycline 500mg Capsules

Quantity: _____ **Frequency:** _____ **Strength:** _____

Route of Administration: _____ **Expected Length of Therapy:** _____

Diagnosis: _____ **ICD Code:** _____

Comments: _____

Please check the appropriate answer for each applicable question.

- | | | |
|---|----------------------------|----------------------------|
| 1. Is the requested drug being used in a footbath? | Y ☐ | N ☐ |
| 2. Is the requested drug being prescribed for the treatment of Plague caused by Yersinia pestis? | Y ☐ | N ☐ |
| 3. Does the patient require more than the plan allowance of 240 capsules per month? | Y ☐ | N ☐ |
| 4. Is the requested drug being prescribed for the treatment of melioidosis caused by Burkholderia pseudomallei? | Y ☐ | N ☐ |
| 5. Does the patient require more than the plan allowance of 180 capsules per month? | Y ☐ | N ☐ |

I attest that the medication requested is medically necessary for this patient. I further attest that the information provided is accurate and true, and that the documentation supporting this information is available for review if requested by the claims processor, the health plan sponsor, or, if applicable a state or federal regulatory agency.

Prescriber (Or Authorized) Signature and Date

Now you can get responses to drug PAs immediately and securely online—without faxes, phone calls, or waiting. How? With electronic prior authorization (ePA)! For more information and to register, go to www.caremark.com/epa.