

REFERRING PRESCRIBER

PREScriBER NAME	NPI #	PHONE	FAX
PRACTICE NAME	OFFICE CONTACT	EMAIL	REFERRAL DATE

PATIENT

→ Attaching a face sheet? Skip this box.

PATIENT NAME	DATE OF BIRTH	PHONE
PRIMARY INSURANCE	POLICY #	GROUP #

INDICATION

check one — this decides the code

- ☐ **Postmenopausal osteoporosis**, high fracture risk
M81.0 · M80.08XA · M80.00XA
- ☐ **Osteoporosis in men**, high fracture risk
M81.0 · M81.8
- ☐ **Glucocorticoid-induced osteoporosis**
M81.8 + Z79.52 — on 7.5 mg/day prednisone or more for 6 months or longer
- ☐ **Men on androgen deprivation therapy** for nonmetastatic prostate cancer
C61 + Z79.818
- ☐ **Women on adjuvant aromatase inhibitor** for breast cancer
breast cancer site code + Z79.811
- ICD-10 submitted:** _____

ORDER

- ☐
- Prolia 60 mg subcutaneously, once every 6 months**

First dose requested: _____ Next dose due: _____

Substitution: ☐ Denosumab biosimilar is acceptable — LIVbetter to use whichever the plan covers ☐ Brand Prolia only

Most plans now make a biosimilar the preferred agent, so leaving substitution open is usually the fastest route to approval.

LABS & REQUIRED BEFORE THE FIRST DOSE

SERUM CALCIUM	CREATININE CLEARANCE or eGFR	25-OH VITAMIN D	DXA (DEXA) T-SCORE + DATE

- ☐ **Calcium is normal, or low calcium has been corrected.** Hypocalcemia is a contraindication.
- ☐ Patient is on calcium 1,000 mg and vitamin D 400 IU or more daily ☐ Oral or dental exam done, or not needed ☐ Pregnancy ruled out
- ☐ **eGFR is under 30, or the patient is on dialysis** — tell us, so we can check calcium weekly for the first month, then monthly

PRIOR TREATMENT

→ most plans require this — a blank here is the most common reason we get denied

- Bisphosphonate already tried** Drug: _____ From: _____ to _____

☐ Failed after 12 months or more ☐ Could not tolerate it ☐ Contraindicated ☐ Fracture or falling bone density while on it
- ☐ Fragility fracture: ☐ Hip ☐ Spine ☐ Other: _____ Date: _____ **FRAX 10-year risk:** major _____ % hip _____ %
- ☐ Not currently on Evenity, teriparatide, abaloparatide or another osteoporosis drug

PLEASE ATTACH

- ☐
- Face sheet
- ☐
- Insurance cards
- ☐
- Office notes
- ☐
- Medication list
- ☐
- Recent labs
- ☐
- DXA report

SIGNATURE

we cannot schedule without it

PREScriBER SIGNATURE	DATE	DISPENSE AS WRITTEN
X		☐ Yes

By signing, you authorize LIVbetter Infusions to act as your prior authorization and specialty pharmacy designated agent with insurance companies and to select the site of care. Prolia should not be stopped without transitioning to another antiresorptive — fracture risk, including multiple vertebral fractures, rises after discontinuation.