Sample Letter of Appeal for Aimovig® (erenumab-aooe)

[Physician/Practice Letterhead]

[Date]

[Payer Name]
[Payer Representative]
[Payer Address]
[City, State ZIP Code]
[Payer Fax Number]

RE: Coverage of Aimovig® (erenumab-aooe) Injection
[Patient Name]
[Patient DOB]
[Policy Number]
[Group Number]
[Treatment Date and Claim Number]
[Amount of Claim]

Attention: [Payer Representative], [Claims Department]

Dear Director of Claims,

I am writing this letter to request a review of a denied claim for my patient, [Patient Name]. On [date of denial], your organization denied this claim for the following reason(s), which are listed on the attached Explanation of Benefits (EOB):

- [Indicate reason(s) for denial from EOB]

[Patient Name] was provided with a prescription for Aimovig® (erenumab-aooe) SureClick® autoinjector. Aimovig® is indicated for the preventive treatment of migraine in adults.

[Consider describing the patient's history, diagnosis, previous and current treatment regimens and their outcomes (eg, Reduction in Monthly Migraine Days, % reduction in monthly migraine days, reduction in acute migraine-specific medication days), physical impairment, etc]

[NOTE: Physicians should exercise medical judgment and discretion in regard to making an appropriate diagnosis and characterization of an individual patient's medical condition. In addition, physicians are responsible for ensuring the accuracy and validity of all billing and claims for appropriate reimbursement.]

Full Prescribing Information for Aimovig® can be found at www.aimovighcp.com

Treatment with Aimovig® is a necessary therapy for this patient's medical condition, and it is my clinical opinion and assessment that [Patient Name] will benefit from Aimovig®. I trust that the enclosed information, along with my medical recommendations, will establish the medical necessity for payment of this claim.

Please contact me at [office phone number] if I can provide you with any additional information to approve my request.

Sincerely,

[Your signature]

[Enclosures:]
[List enclosures as appropriate: Examples of enclosures include excerpt(s) from patient's medical record, Explanation of Benefits (EOB), relevant treatment guidelines, and product Prescribing information.]

This page is for your reference only. Content on this page does not need to be sent to the insurance company.

INDICATION

Aimovig® (erenumab-aooe) is indicated for the preventive treatment of migraine in adults.

IMPORTANT SAFETY INFORMATION

Contraindication: Aimovig® is contraindicated in patients with serious hypersensitivity to erenumab-aooe or to any of the excipients. Reactions have included anaphylaxis and angioedema.

Hypersensitivity Reactions: Hypersensitivity reactions, including rash, angioedema, and anaphylaxis, have been reported with Aimovig® in post marketing experience. Most reactions were not serious and occurred within hours of administration, although some occurred more than one week after administration. If a serious or severe reaction occurs, discontinue Aimovig® and initiate appropriate therapy.

Constipation with Serious Complications: Constipation with serious complications has been reported following the use of Aimovig® in the postmarketing setting. There were cases that required hospitalization, including cases where surgery was necessary. The onset of constipation was reported after the first dose in a majority of these cases, but patients also reported later on in treatment. Aimovig® was discontinued in most reported cases. Constipation was one of the most common (up to 3%) adverse reactions reported in clinical studies.

Monitor patients treated with Aimovig® for severe constipation and manage as clinically appropriate. Concurrent use of medications associated with decreased gastrointestinal motility may increase the risk for more severe constipation and the potential for constipation-related complications.

Hypertension: Development of hypertension and worsening of pre-existing hypertension have been reported following the use of Aimovig® in the postmarketing setting. Many of the patients had pre-existing hypertension or risk factors for hypertension. There were cases requiring pharmacological treatment and, in some cases, hospitalization. Hypertension may occur at any time during treatment but was most frequently reported within seven days of dose administration. In the majority of the cases, the onset or worsening of hypertension was reported after the first dose. Aimovig® was discontinued in many of the reported cases.

Monitor patients treated with Aimovig® for new-onset hypertension, or worsening of pre-existing hypertension, and consider whether discontinuation of Aimovig® is warranted if evaluation fails to establish an alternative etiology.

Adverse Reactions: The most common adverse reactions in clinical studies (≥ 3% of Aimovig®-treated patients and more often than placebo) were injection site reactions and constipation.

Please see accompanying Aimovig® full Prescribing Information.

USA-334-83910