

Prior Authorization Overview

To support patient access to EOHILIA, healthcare providers may be required to obtain a prior authorization (PA) with a Letter of Medical Exception.

Information for a Letter of Medical Exception

- Summary of the patient's diagnosis
- Summary of the patient's medical history
- Rationale for treatment with EOHILIA and why it is appropriate for your patient



Download an editable Letter of Medical Exception at EohiliaHCP.com/LME

Appealing a claim denial for EOHILIA coverage

- Review the Explanation of Benefits to determine the reason for the claim
- Verify the appeal process with the insurance provider
- Submitting a Letter of Appeal, with any required appeal forms or additional documentation, can further explain the patient's medical need to the insurance provider
- File the appeal as soon as possible and within filing time limits



Download an editable Letter of Appeal at EohiliaHCP.com/LOA

If you have any questions about access support for EOHILIA, please reach out to your Takeda Regional Business Manager.

This resource is provided for informational purposes only and is not intended to provide reimbursement or legal advice. Contact third-party payers for specific information on their current coverage, reimbursement, and coding policies.

