

Streamline the Prior Authorization (PA) Process With the American Academy of Dermatology Association (AADA) PA Appeal Letter Tool

Customizable PA and Appeal Letters

We know that the PA and appeals process can cause barriers to getting patients started on treatment quickly. This easy-to-use tool can help AADA members* streamline the PA and appeals process by quickly creating customizable appeal letters for COSENTYX[®] (secukinumab). It features:

- Letters developed and revised annually by AADA members
- Robust clinical documentation and references
- Content solely developed by the AADA

Prior Authorization Appeal Letter Tool

- Content revised annually by AAD members
- Provides robust clinical documentation
- Currently supports over 50 drugs
- New FDA-approved drugs added regularly

[Create a Letter](#)

Member login required | [Request practice staff access](#)



An AAD/A Official Licensee
Your trusted resource for dermatological information.

Tool and content solely developed by the American Academy of Dermatology.

AAD recognizes our official licensee:
Novartis Pharmaceuticals Corporation



Visit this Novartis website for more information on [office resources](#) and [patient resources](#).

Novartis is an AADA official licensee, streamlining the PA and appeals process for COSENTYX and helping your patients get started on treatment.

Create a letter using the AADA PA Appeal Letter Tool:

<https://www.aad.org/member/practice/drugs/prior-authorization-novartis>

FDA, US Food and Drug Administration.

*AADA member login is required to access the tool. AADA members may submit a request for their practice staff to access the tool by using the "request practice staff access" link. Once added, staff can sign in and access the tool using their own login. Please note that personal information entered in the prior authorization tool is not saved by the AADA or shared with any entity.

Please see Important Safety Information on pages 4-5. Please see accompanying full Prescribing Information, including Medication Guide.

Steps to create a custom letter



Create a letter to get started.

Log in to begin

[Create a Letter](#)

Member login required | [Request practice staff access](#)

Click the Create a Letter button to start customizing your letter.

Note: You can skip past any fields that you lack information for or do not apply.

Treatment information

Step 1 of 5

Dermatologic disease with ICD-10 diagnosis code

psoriasis vulgaris (L40.0) ▼

Name of drug

secukinumab (Cosentyx®) ▼

Alternative treatment drug options

For step therapy protocols, select drug/treatment the insurance company is requiring you to prescribe your patient as an alternative treatment (skip if not applicable).

1

Select dermatologic disease, drug name, and any drugs/treatments the insurance company is requiring you to prescribe to your patient as an alternative treatment.

Insurance information

Step 2 of 5

Name of medical director

Insurance company name

Insurance company address

Insurance company city, state, zip

City

State

Zip Code

[< Back](#)[Continue](#)

2

Fill in insurance information.

Please see Important Safety Information on pages 4-5. Please see accompanying full Prescribing Information, including Medication Guide.

Steps to create a custom letter (cont)

Patient information

Step 3 of 5

Patient name

Patient health insurance identification number

Patient date of birth

Date of prior authorization

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3

Add patient information.

Previously prescribed therapies

Step 4 of 5

I have previously prescribed this patient the following therapies (optional):

Name of medication

Dates prescribed
From To

Reason for stopping medication

[Add Another Therapy](#)

[Back](#) [Continue](#)

4

Record previously prescribed therapies, if applicable.



Download your letter:

Your customized, editable letter will output to your computer and is ready for you to save and send to insurance companies to request a formal appeal.

Letter complete

Step 5 of 5

[Create New Letter](#) [Download Letter](#)

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Indications

COSENTYX[®] (secukinumab) is indicated for the treatment of moderate to severe plaque psoriasis (PsO) in patients 6 years and older who are candidates for systemic therapy or phototherapy.

COSENTYX is indicated for the treatment of active psoriatic arthritis (PsA) in patients 2 years of age and older.

COSENTYX is indicated for the treatment of adult patients with active ankylosing spondylitis (AS).

COSENTYX is indicated for the treatment of adult patients with active non-radiographic axial spondyloarthritis (nr-axSpA) with objective signs of inflammation.

COSENTYX is indicated for the treatment of active enthesitis-related arthritis (ERA) in patients 4 years of age and older.

COSENTYX is indicated for the treatment of adult patients with moderate to severe hidradenitis suppurativa (HS).

IMPORTANT SAFETY INFORMATION

CONTRAINDICATIONS

COSENTYX is contraindicated in patients with a previous serious hypersensitivity reaction to secukinumab or to any of the excipients in COSENTYX. Cases of anaphylaxis have been reported during treatment with COSENTYX.

WARNINGS AND PRECAUTIONS

Infections

COSENTYX may increase the risk of infections. In clinical trials, a higher rate of infections was observed in COSENTYX treated subjects compared to placebo-treated subjects. In placebo-controlled clinical trials in subjects with moderate to severe PsO, higher rates of common infections, such as nasopharyngitis (11.4% versus 8.6%), upper respiratory tract infection (2.5% versus 0.7%) and mucocutaneous infections with candida (1.2% versus 0.3%) were observed in subjects treated with COSENTYX compared to placebo-treated subjects. A similar increase in risk of infection in subjects treated with COSENTYX was seen in placebo-controlled trials in subjects with PsA, AS and nr-axSpA. The incidence of some types of infections, including fungal infections, appeared to be dose-dependent in clinical trials.

In the postmarketing setting, serious and some fatal infections have been reported in patients treated with COSENTYX.

Exercise caution when considering the use of COSENTYX in patients with a chronic infection or a history of recurrent infection. Instruct patients to seek medical advice if signs or symptoms suggestive of an infection occur. If a patient develops a serious infection, monitor the patient closely and discontinue COSENTYX until the infection resolves.

Pre-treatment Evaluation for Tuberculosis

Evaluate patients for tuberculosis (TB) infection prior to initiating treatment with COSENTYX. Avoid administration of COSENTYX to patients with active TB infection. Initiate treatment of latent TB prior to administering COSENTYX. Consider anti-TB therapy prior to initiation of COSENTYX in patients with a past history of latent or active TB in whom an adequate course of treatment cannot be confirmed. Monitor patients closely for signs and symptoms of active TB during and after treatment.

Inflammatory Bowel Disease

Inflammatory Bowel Disease (IBD) exacerbations, in some cases serious and/or leading to discontinuation of COSENTYX, occurred in COSENTYX treated subjects during clinical trials in PsO, PsA, AS, nr-axSpA, and HS. In adult subjects with HS, the incidence of IBD was higher in subjects who received COSENTYX 300 mg every 2 weeks (Ulcerative Colitis [UC] 1 case, EAIR 0.2/100 subject-years; Crohn's Disease [CD] 1 case, EAIR 0.2/100 subject-years) compared to subjects who received COSENTYX 300 mg every 4 weeks (IBD 1 case, EAIR 0.2/100 subject-years). In addition, new onset IBD cases occurred in subjects treated with COSENTYX in clinical trials. In an exploratory trial in 59 subjects with active Crohn's disease [COSENTYX is not approved for the treatment of Crohn's disease], there were trends toward greater disease activity and increased adverse reactions in subjects treated with COSENTYX as compared to placebo-treated subjects.

Exercise caution when prescribing COSENTYX to patients with IBD. Patients treated with COSENTYX should be monitored for signs and symptoms of IBD.

Eczematous Eruptions

In postmarketing reports, cases of severe eczematous eruptions, including atopic dermatitis-like eruptions, dyshidrotic eczema, and erythroderma, were reported in patients receiving COSENTYX; some cases resulted in hospitalization. The onset of eczematous eruptions was variable, ranging from days to months after the first dose of COSENTYX.

Treatment may need to be discontinued to resolve the eczematous eruption. Some patients were successfully treated for eczematous eruptions while continuing COSENTYX.

Hypersensitivity Reactions

Anaphylaxis and cases of urticaria occurred in COSENTYX treated subjects in clinical trials. If an anaphylactic or other serious allergic reaction occurs, administration of COSENTYX should be discontinued immediately and appropriate therapy initiated.

The removable caps of the COSENTYX Sensoready[®] pen and the COSENTYX 1 mL and 0.5 mL prefilled syringes contain natural rubber latex, which may cause an allergic reaction in latex-sensitive individuals. The safe use of the COSENTYX Sensoready pen or prefilled syringe in latex-sensitive individuals has not been studied.

Immunizations

Prior to initiating therapy with COSENTYX, consider completion of all age-appropriate immunizations according to current immunization guidelines. COSENTYX may alter a patient's immune response to live vaccines. Avoid use of live vaccines in patients treated with COSENTYX.

MOST COMMON ADVERSE REACTIONS

Most common adverse reactions (>1%) are nasopharyngitis, diarrhea, and upper respiratory tract infection.

Questions about Novartis Patient Support?

We are here for you. We can help you and your office navigate the PA and appeals process for your patients.

Call us at **1-844-COSENTYX (1-844-267-3689)**. Our customer service hours are Monday-Friday, 8:00 AM-8:00 PM ET, excluding holidays.

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Need help or have questions?

Contact the AADA at mrc@aad.org or (866) 503-SKIN (7546)



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