

Prior Authorization Considerations

Use this checklist to help you with the TREMFYA® prior authorization (PA) process to reduce fulfillment delays.

Tremfya *withMe*

Tremfya®
(guselkumab)



TREMFYA withMe Access Program

TREMFYA withMe offers eligible patients intravenous induction & subcutaneous TREMFYA® at no cost in as fast as 3 days for up to 3 years or until their commercial insurance covers the medicine. See program requirements at [TREMFYAwithMeAccess.com](https://www.tremfya.com/withme).



1) Benefits Investigation (BI)

- For subcutaneous (SC) induction, request one BI to cover both SC induction and maintenance doses
Note: Patients with commercial insurance may still be eligible for the TREMFYA withMe Access Program even if BI for IV comes back with “not covered” or “BI Not Disclosed” or “3rd Party Not Disclosed.”
- Identify payer PA requirements outlined in coverage determination



2) Induction Steps

- Submit PA for SC or IV with Letter of Medical Necessity (LMN), if required
Note: If starting a patient on IV induction, payers often require that IV induction doses are administered before accepting PA for SC maintenance doses.
- Receive PA Decision
IF APPROVED: Schedule first induction dose. For patients starting on SC induction, instruct patient how to self-inject and determine if patient will be self-administering.
IF DENIED: Submit letter of appeal and call your FRM with questions.
Note: Patients with commercial insurance may be eligible for the TREMFYA withMe Access Program.



3) SC Maintenance Dose Steps

- Confirm PA for SC requirements for maintenance
Note: For patients starting on SC induction, a separate SC maintenance PA is NOT required. Remember to indicate that the maintenance doses are part of the patient’s continuity of care.
- For patients starting on IV induction, payer may require date of IV induction or proof of response
- Receive PA decision:
IF APPROVED: Educate patient on SC next steps.
IF DENIED: Submit Letter of Appeal and call your FRM with questions.
Note: Patients with commercial insurance may be eligible for the TREMFYA withMe Access Program.

Ways to reduce the chance of denial

Provide the following information (with LMN, if required):

- Make sure the diagnosis matches the FDA indication (ICD-10 code)
- FDA-approved dosing (induction dosing will vary depending on type [SC or IV])
- Step edits met (eg, prior meds, generic, corticosteroids)
- Confirm medical plan criteria met
 - tuberculosis test results
 - prior fail therapies with dates (designate whether patient failed, did not tolerate, or was contraindicated)
 - diagnostic testing
- For pharmacy insurance, in addition to the information listed above, also note any previously administered IV induction dose and response to therapy (if applicable)

Have a question? Contact your Field Reimbursement Manager (FRM).

The patient support and resources provided by TREMFYA withMe are not intended to give medical advice, replace a treatment plan from the patient’s healthcare provider, offer services that would normally be performed by the provider’s office, or serve as a reason to prescribe TREMFYA®.



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