## **GETTING STARTED WITH DIACOMIT®**

A STEP-BY-STEP GUIDE TO ACCESS FOR YOUR PRACTICE









Fax completed Enrollment Form and other information to our specialty pharmacy at 833-871-4137.

Requirements for submission:

- a) download and complete the DIACOMIT Enrollment Form, available at DIACOMIT.com/resources
- **b)** a copy of the patient's insurance card
- c) a complete prescription with clear dosing instruction and any titration instruction
- d) patient's medical records

If required by payer, submit Prior Authorization form.

Our specialty pharmacy will verify the patient's insurance—not every payer requires prior authorization. If prior authorization is needed, complete the required form and send it to the insurance company.

Advise the patient's caregiver to answer or return any calls from the specialty pharmacy to set up their medication shipment and delivery.

Stay connected!
Contact our specialty
pharmacy with any
changes in the
patient's prescription,
insurance coverage,
or contact information.

BIOCODEX

(stiripentol) 250 mg, 500 mg capsules or powder for oral suspension