

# Drug Prior Authorization

Please use the online search tool for information on a specific drug.

## What Is Prior Authorization?

Prior authorization (PA) is a quality and safety program that promotes the proper use of certain medications. If your doctor prescribes a medication that is included in our prior authorization program, you must get prior approval before your plan will cover your medication.

Some medications must be reviewed before they can be authorized because they may:

- Only be approved or effective for safely treating specific conditions.
- Cost more than other medications used to treat the same or similar conditions.

We base the PA program on U.S. Food and Drug Administration and manufacturer guidelines, medical literature, safety, accepted medical practice, appropriate use, and benefit design.

If your drug requires PA, we encourage you to talk with your doctor about your treatment and medication options. If you have questions about the PA process, call the phone number on your member ID card.

## Which Medications Are Included?

Some specialty and nonspecialty drugs require PA under your **pharmacy benefit**. Note that before your plan will cover some drugs, you must try one or more covered alternatives first.

Some health plans also require PA for specialty drugs that are covered under the **medical benefit**. Please consult the Medical Drug List for more information.

## What Are the Possible Outcomes of a Prior Authorization Request?

There are two possible outcomes:

- If you meet the requirements, your drug will be approved, and we will cover it. Your drug may be approved for up to one year or more. You will be sent a letter letting you know that your drug has been approved.
- If you do not meet the requirements, your PA will be denied. Also, if your doctor does not send in the requested information within a certain period of time, your PA will be denied. If your request is denied, both you and your doctor will be sent a

letter explaining the denial. The letter will include information about how you can appeal the decision.

## How Do I Request Prior Authorization?

To request PA for drugs covered under the pharmacy benefit, please call one of the following numbers:

**Affordable Care Act (ACA)/Exchange & Compliant Plan Members:** 833-494-2987

**All Other Members:** 855-811-2218

## What if I Need a Short-Term Supply?

If you must take a medication that requires PA right away, there are two options that may work for you:

- Ask your doctor if a sample is available.
- Check with your pharmacy to request a short-term supply of five days or less. Keep in mind, you will be responsible for the full cost at that time. If the PA request is approved, then your pharmacist can fill the rest of your prescription.

## What Happens at the Pharmacy?

The pharmacist enters your prescription information into the computer system. If your medication needs PA and you already have it, the pharmacist will fill your prescription. If you do not have PA, you have three choices:

- You or your pharmacist can call your doctor and get a prescription for a different medication that does not need PA.
- You can pay full price for your medication.
- You or your pharmacist can ask your doctor to get PA for you.

If you do not meet the PA requirements, you can still choose another option. You and your doctor make the final decision about the medication that is right for you.

If you submit your prescription to your plan's home delivery (mail-order) pharmacy and do not get the required PA, the pharmacy will not fill your prescription. You will receive notification by mail.

## What Happens at a Specialty Pharmacy?

Usually, your doctor will call or fax a prescription directly to the specialty pharmacy. If your prescription requires PA, the specialty pharmacy will tell your doctor how to request this.