

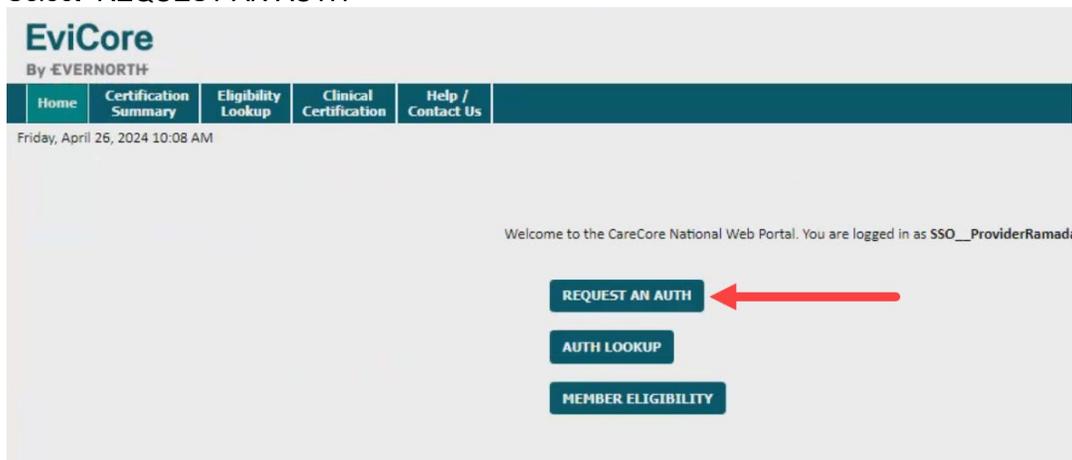


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## Creating a Pharmacy Drug PA Request

1. Select “REQUEST AN AUTH”



*Continued on next page*



2. Select the radio dial "Pharmacy Drugs (Express Scripts Coverage) and then click CONTINUE

**EviCore**  
By EVERNORTH

Home	Certification Summary	Authorization Lookup	Eligibility Lookup	Clinical Certification	Certification Requests In Progress
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Thursday, August 01, 2024 4:39 PM

### Request an Authorization

To begin, please select a program below:

- Durable Medical Equipment(DME)
- Gastroenterology
- Lab Management Program
- Medical Drug Management
- Medical Oncology Pathways
- Musculoskeletal Management
- Pharmacy Drugs (Express Scripts Coverage)
- Radiation Therapy Management Program (RTMP)
- Radiology and Cardiology
- Sleep Management

**CONTINUE**

[Click here for help](#)

3. Select/Enter the prescriber's information  
Provider search will search only for providers that you have previously submitted a pharmacy drug PA request. If you have never submitted a pharmacy drug PA request for this particular prescriber, you will need to enter the provider's information manually.

*Continued on next page*



- a. Entering a provider – any field that has an “\*” is required before continuing

**Add Provider Information**

Search for a provider below, or enter Provider details, to add a new one.

Provider Search:

NPI:*	<input type="text"/>
Suffix:	<input type="text"/>
First Name:*	<input type="text"/>
Last Name:*	<input type="text"/>
Street:*	<input type="text"/>
Address 2:	<input type="text"/>
City:*	<input type="text"/>
State:*	Select a state <input type="button" value="v"/>
Zip:*	<input type="text"/>
Phone:*	<input type="text"/>
Fax:	<input type="text"/>

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*Continued on next page*

- b. Searching for a provider – Type in name and if you have submitted a case for that provider in the past, their information will populate. Click the record and all the fields will populate to allow you to continue.



**EviCore**  
By EVERNORTH

Home Certification Summary Eligibility Lookup Clinical Certification Help / Contact Us

Friday, April 26, 2024 10:04 AM

### Add Provider Information

Search for a provider below, or enter Provider details, to add a new one.

Provider Search:

NPI:\*

Suffix:

First Name:\*

Last Name:\*

Street:\*

Address Line 2:

City:\*

State:\*

Zip:\*

Phone:\*

Fax:

 Prescriber's information that is populated from the search feature can be edited after selected. You will be asked to confirm the changes to either update the existing record or create a new one.

*Continued on next page*

4. Enter the patient's information – all fields are required, then click SEARCH



### Patient Eligibility Lookup

Patient Pharmacy ID:\*

Date Of Birth:\*  MM/DD/YYYY

Patient First Name:\*

Patient Last Name:\*

**SEARCH**

Search Results:

**BACK** **CONTINUE**

Date of Birth must be entered as DD/MM/YYYY

- c. Select the patient from the search results that appear
- d. Click CONTINUE

### Patient Eligibility Lookup

Patient Pharmacy ID:\*

Date Of Birth:\*  MM/DD/YYYY

Patient First Name:\*

Patient Last Name:\*

**SEARCH**

Search Results:

	Patient Name	Patient Pharmacy ID	Date of Birth	Gender
<b>SELECT</b>	██████████ L	1██████████	██████████	██████████

**BACK** **CONTINUE**

*Continued on next page*



5. Enter the Drug Information

- a. In the “Search Pharmacy Drug” field, start typing the drug name to bring back options for selecting. Click on the drug from the list

**Search Pharmacy Drug**

Hum		
Drug Name	Dosage Form	Drug Strength
Humira	SYRINGEKIT	40MG / 0.8ML
Humira Pen	PEN IJ KIT	40MG / 0.8ML
Humira(CF)	SYRINGEKIT	40MG / 0.8ML



The search function engages after the 3<sup>rd</sup> letter is typed

*Continued on next page*



- b. Once the drug is selected, enter additional information about how the drug is to be taken. Any field with an asterisk is required before continuing to submit the PA Request. All other fields are optional.

**Search Pharmacy Drug**

Search by Brand or Generic drug name

---

Selected Drug: **Humira Pen, 40MG / 0.8ML**

Drug Form:\* Pen

Quantity:\* Pen has been selected as the drug form. Please select your quantity in Pen(s).  
 [?]

Day Supply:\*  [?]

Date of Service:  MM/DD/YYYY

Pharmacy:  This medication is being dispensed from an MTF (Military Treatment Facility)

DAW:\* Should this prior Authorization be reviewed for this branded medication (Dispense as Written)?  
If not, it will be processed for a generic equivalent.  
 Yes (drug will NOT be substituted)  
 No (drug may be substituted for an available generic brand on PA request)

Primary Diagnosis: Select a Primary Diagnosis Code (Lookup by Code or Description)  
   
**Trouble selecting diagnosis code? Please follow [these steps](#)**

Secondary Diagnosis: Select a Secondary Diagnosis Code (Lookup by Code or Description)  
*Secondary Diagnosis is optional for Radiology*

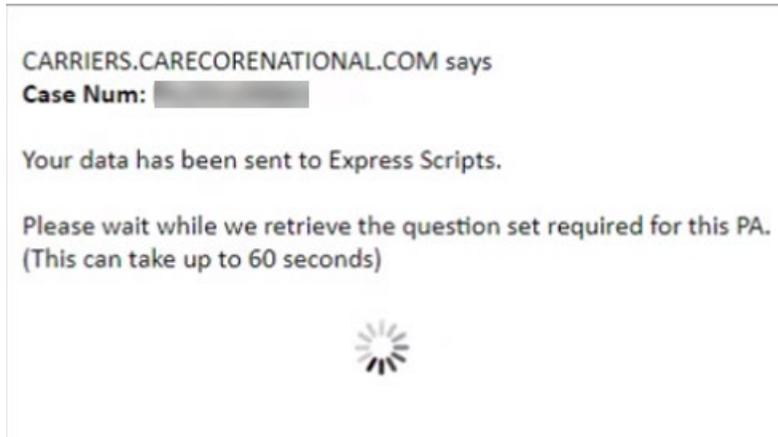
Click the "Submit PA Request" button to submit this information to Express Scripts (If it is disabled, be sure all required fields have been completed). This electronic submission does not require a signature.

Express Scripts will respond automatically with your next steps.

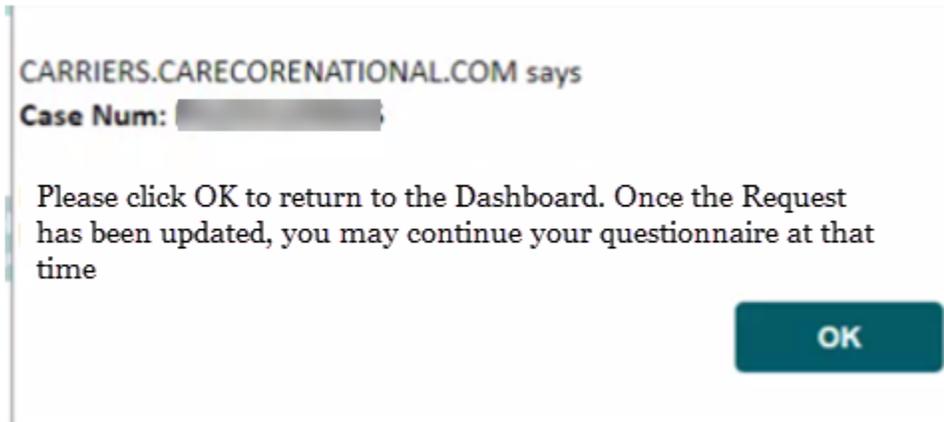
←

Continued on next page

- c. The data entered thus far will be submitted to Express-Scripts and the prior authorization questions for the patient's benefit plan will be returned



- d. If the questionnaire fails to return, you will be automatically directed to the dashboard. We will continue to work to obtain the questionnaire and you will be able to come back and answer the questions later.



*Continued on next page*



6. Answer all questions presented
- a. To answer a question, select the corresponding radio dial

**Questionnaire**

Please provide all information requested. Failure to complete this form in its entirety may result in delayed processing or the PA request will be closed for lack of information. All questions required to submit.

**Questions**

Is the patient currently receiving the requested medication?

Yes

No

NEXT

- b. When a radio dial is selected, the NEXT will become active. Click NEXT

**Questionnaire**

Please provide all information requested. Failure to complete this form in its entirety may result in delayed processing or the PA request will be closed for lack of information. All questions required to submit.

**Questions**

Is the patient currently receiving the requested medication?

Yes

No

NEXT

- c. Some questions will have free form entry – enter your answer by typing in the provided field

---

*Continued on next page*



- d. If need to go back and change an answer to a question, hit the PREVIOUS button

**Questionnaire**

Please provide all information requested. Failure to complete this form in its entirety may result in delayed processing or the PA request will be closed for lack of information. All questions required to submit.

**Questions**

Is the patient currently receiving the requested medication?

Yes  
 No

---

Is the customer's condition on or around the eyes, eyelids, axilla, or genitalia?

**PREVIOUS** ←
**NEXT**

- e. Upload a document as needed
  - i. Select "Choose File"
  - ii. Select document to attach

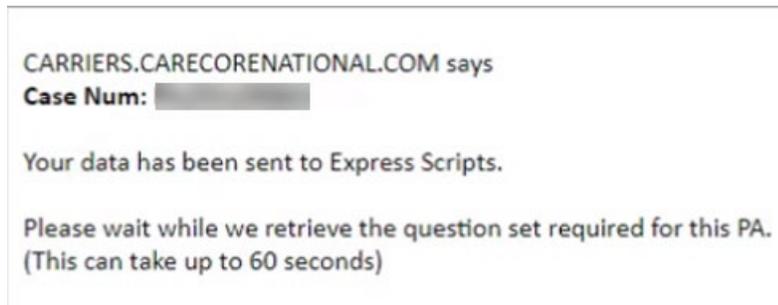
**Document Upload**

Upload supporting documentation below. (Must be png, tiff, jpeg, or pdf format. Maximum file size: 10MB)

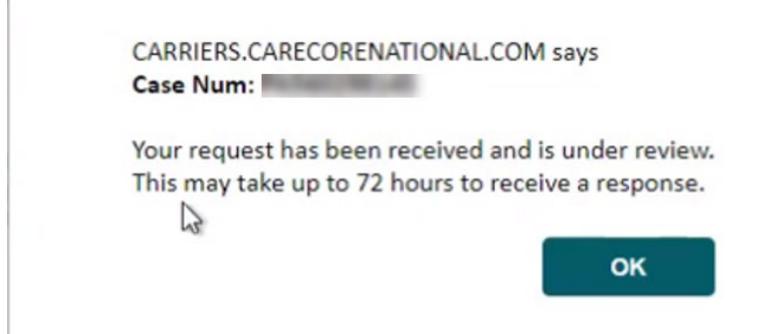
- f. Continue answering questions until the "SEND TO PLAN" button activates by becoming darker in color.

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- g. Once all questions have been answered and an attachment has been uploaded (if necessary), select SEND TO PLAN



- h. Sometimes submitted answers need time for review. In those situations, click “OK” to route to the dashboard



- i. To save all progress, including any questions answered thus far, click “SAVE (Finish Later). You will be directed to the dashboard where you can come back later and resume activity where you stopped.
- j. To cancel all progress, including any questions answered thus far, click CANCEL REQUEST. You will be directed to the dashboard and will see that the request has been cancelled.

Status	PA Note	Case Initiation Date	Updated Status Date	Upld
Cancelled				

CaseId : 2 [redacted] 24; Status : Cancelled; Explanation : HU [redacted] A  
4 [redacted] T.

Continued on next page



## Dashboard (Certification Summary)

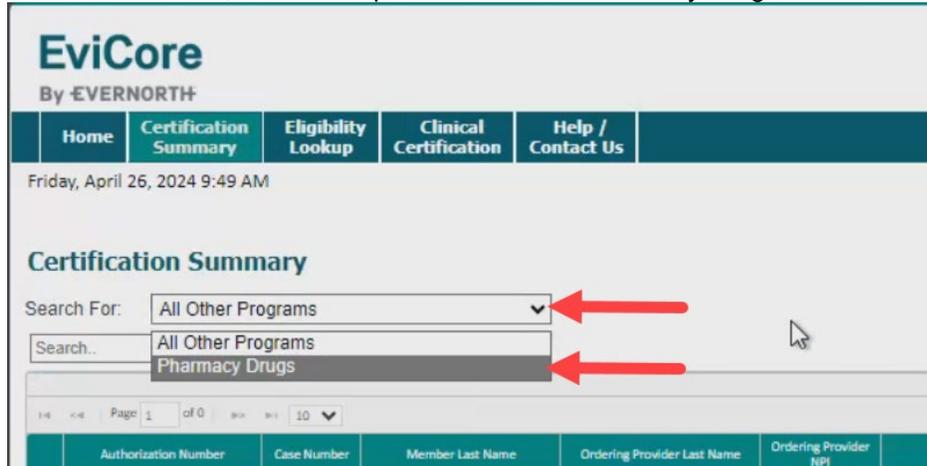
The Dashboard is where you can see both see the status of all cases you have submitted, search for other cases, or start another New Drug PA request. You can also view documents uploaded for a PA Case.

### Navigating to Pharmacy Drugs Dashboard without building a case

1. From the home screen, click “Certification Summary”



2. In the “Search For” section, use the drop down to select “Pharmacy Drugs”



Continued on next page



## Searching for a pharmacy Case

1. In the Pharmacy Drugs Dashboard, type in the case number and select “SEARCH”

## Definition of Status of cases:

1. Approved cases will show a status of “Approved PA”
  - a. Can hover mouse over the blue icon under the column of PA Note to see more details around that approval.

Status	PA Note	Case Initiation Date	Updated Status Date	Uploaded Documents
Approved (PA)				<a href="#">View Documents</a>
				<a href="#">View Documents</a>

Your request has been approved. Please refer to this PA in the dashboard for the Case details.

Continued on next page

2. Denied cases will show a status of “Denied PA”.
  - a. Can hover mouse over the blue icon under the column of PA Note to see more details around that denial and how to create an appeal



Status	PA Note	Case Initiation Date	Updated Status Date	Uploaded Documents
Denied (PA) - <a href="#">Appeal</a>				<a href="#">View Documents</a>

CaseId : [REDACTED] Status : Denied; Review Type : Prior Auth;  
 Appeal Information : Attention : ATTN : CLINICAL APPEALS  
 DEPARTMENT EXPRESS SCRIPTS PO BOX 66588,ST.  
 LOUIS,MO,63166-6588 Phone : 800-753-2851 Fax : 877-852-4070; Important - Please read the below note on eAppeals :  
 Please reference the denial letter for information on the rights for an appeal, rationale for the denial, and how to submit an appeal including if any information is needed to support the appeal.  
 Note about urgent situations - Generally, an urgent situation is one which, in the opinion of the provider, the health of the patient may be in serious jeopardy or may experience pain that cannot be adequately controlled while waiting for a decision on the appeal.;

3. Waiting: ESI to send Question Set
  - a. This happens when the questionnaire fails to return after you have entered all the provider, patient and drug information and have submitted the PA Request. Express Scripts will be working to obtain the plan’s PA Question Set so that you can complete the PA Questionnaire.

Patient Name	Drug Name	Status	PA Note	Case
[REDACTED]	[REDACTED]	Waiting: ESI to send Question Set		04

- b. When the benefit plan’s PA Question Set has been returned, the status will change to “Waiting: Physician to submit answers – Start”

Patient Name	Drug Name	Status	PA Note	Case
[REDACTED]	[REDACTED]	Waiting: Physician to submit answers - <a href="#">Start</a>		0

Continued on next page



- 4. Waiting: Physician to submit answers – Start
  - a. This is the notification that the PA Questionnaire is ready to be started when the questionnaire failed to return after you have entered all the provider, patient and drug information and have submitted the PA Request. Click on Start to begin answering the PA Questions.

Status	PA State
Waiting: Physician to submit answers - <a href="#">Start</a>	

- 5. Waiting: Physician to submit answers – Finish
  - a. This is the notification that the PA Question was left incomplete and needs to be finished in order for a PA determination.
  - b. Click Finish to complete the PA questions

Status	PA State
Waiting: Physician to submit answers - <a href="#">Finish</a>	

	<p>If a PA is no longer needed:</p> <ol style="list-style-type: none"> <li>1. Click Finish to open the PA Question Set.</li> <li>2. Click “Cancel Request”</li> </ol> <div style="display: flex; justify-content: center; gap: 20px;"> <div style="border: 1px solid #ccc; padding: 5px 10px; background-color: #e0e0e0;">CANCEL REQUEST</div> <div style="border: 1px solid #ccc; padding: 5px 10px; background-color: #808080; color: white;">SAVE <small>(Finish Later)</small></div> <div style="border: 1px solid #ccc; padding: 5px 10px; background-color: #808080; color: white;">SEND TO PLAN</div> </div>
---	---

- 6. Waiting: Decision response from ESI
  - a. This is when ESI has received all the answers submitted but may take up to 72 hours to provide a response.

Status
Waiting: Decision response from ESI

- b. Once a response from ESI is obtained, the status will be updated on the case. You will see that updated status when you log back into the portal.

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7. Closed

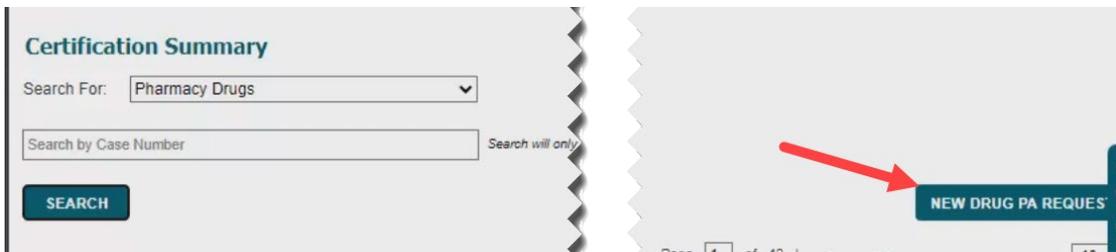


- a. Refer to PA note what close code was received by hovering over the blue note icon

Status	PA Note	Case Initiation Date	Updated Status Date	Uploaded Documents
Closed	 		04/28/2024	<a href="#">View Documents</a>

**Start another New Drug PA Request from Pharmacy Drugs Dashboard**

1. Click on “NEW DRUG PA REQUEST”
2. You will be automatically directed to where you can enter the provider information



**Viewing uploaded documents**

1. Click View Documents to view documents that were uploaded as part of a PA Request

Page  of 13 | > >>  ▾

PA Note	Case Initiation Date	Updated Status Date	Uploaded Documents
	04/04/2024	04/04/2024	 <a href="#">View Documents</a>

*Continued on next page*



## Appeals

### Starting an Appeal

Appeals can be electronically submitted for a previously denied request from the dashboard.

1. Click the blue Appeal link next to the denied case

Status	Note	Case Initiation Date	Updated Status Date	Uploaded Documents
Denied (PA) - <a href="#">Appeal</a>				<a href="#">View Documents</a>

CaseId : ██████████ Status : Denied; Review Type : Prior Auth;  
 Appeal Information : Attention : ATTN : CLINICAL APPEALS  
 DEPARTMENT EXPRESS SCRIPTS PO BOX 66588.ST.

2. The appeal questionnaire section will open. Enter all necessary information and click SEND TO PLAN

### Appeal a Decision

#### Appeal Request

**Are you requesting an URGENT review?**  
 Will not receiving this drug seriously jeopardize the enrollee's life, health, or ability to regain maximum function?

YES, it will jeopardize, so I am requesting an EXPEDITED appeal  
 NO, it will not jeopardize, so I am requesting a STANDARD appeal

**Reason for appealing the denied drug.\***  
 Review your plan's reasons for denial in their determination letter. Please utilize that information to provide specific, detailed clinical information/rationale of your patient's health status to address their denial reasons.

#### Document Upload

Upload supporting documentation below. (Must be png, tiff, jpeg, or pdf format. Maximum file size: 10MB)

No file chosen

BACK TO DASHBOARD

SEND TO PLAN

3. If don't want to submit an appeal, click "BACK TO DASHBOARD"

*Continued on next page*



The dashboard will show you status of your appeal

1. Approved Appeal

The screenshot shows a table with a 'NEW' button in the top right corner. The table has five columns: 'Status', 'PA Note', 'Case Initiation Date', 'Updated Status Date', and 'U'. The first row has the status 'Approved (Requested Appeal)'. A hand icon points to the 'PA Note' column, which has opened a yellow tooltip. The tooltip contains the following text: 'CaseId : 2 [redacted]; Status : Approved; Review Type : Prior Auth; Coverage Start Date : 09/12/2023; Coverage End Date : 10/11/2024;'. There is a small 'X' icon in the top right corner of the tooltip.

Status	PA Note	Case Initiation Date	Updated Status Date	U
Approved (Requested Appeal)				

2. Denied Appeal

The screenshot shows a table with a 'NEW' button in the top right corner. The table has five columns: 'Status', 'PA Note', 'Case Initiation Date', 'Updated Status Date', and 'U'. The first row has the status 'Denied (Requested Appeal)'. A hand icon points to the 'PA Note' column, which has opened a yellow tooltip. The tooltip contains the following text: 'CaseId : 2 [redacted]; Status : Denied; Review Type : Prior Auth;'. There is a small 'X' icon in the top right corner of the tooltip.

Status	PA Note	Case Initiation Date	Updated Status Date	U
Denied (Requested Appeal)				

---

END