

# Pharmacy prior authorization procedures

Pharmacy prior authorizations for Fallon Health members are broken down into two categories: Pharmacy benefits which are patient self-administered drugs (including oral medications) and Medical benefits which are drugs administered by physicians (including home infusion). **CVS Caremark® reviews pharmacy benefit drugs.** For Medicare members only, Fallon Health reviews glucose monitor and test strip requests. **Magellan Rx Management reviews medical benefit drugs.** We have developed the following three-step pharmacy prior authorization process as an efficient way to serve both our members and providers.

## 1 Does your patient need a prior authorization for a medical or pharmacy benefit drug?

Please use the Online Drug Formulary to determine which medications require Utilization Management (UM). Each drug with UM includes a link to the criteria, ePA, and fax form.

### Important Information regarding the Massachusetts Standard PA Form and Commercial plan members

Please review the criteria posted on the Online Drug Formulary prior to completing the PA form or submitting an ePA and provide all relevant data for each part of the criteria. If there is no specific field for the data on the PA form, please use the "Additional information pertinent to this request" field. For Commercial member PA requests, **you must use the state-mandated standard PA form, or otherwise use ePA or telephone.**

If prior authorization is needed for a medical benefit drug—one which is administered by a physician (including home infusion)—please choose the "Medical benefit formulary" in the drop down to locate the drug being requested. Then use the links for ePA or fill out the corresponding PA form.

If prior authorization is needed for a pharmacy benefit drug—one which is self-administered by a patient (including oral medications)—locate the member's plan in the drop down to locate the drug being requested. Then use the links for ePA or fill out the corresponding PA form.

*Please note:* to facilitate the prior authorization process, we recommend reviewing the criteria documents available at [fallonhealth.org/providers](http://fallonhealth.org/providers). Simply click on "Pharmacy" then "Online drug formulary" and search for the drug name.

**Prior authorization forms** for both medical and pharmacy benefits can be found at [fallonhealth.org/providers](http://fallonhealth.org/providers).

- Click "**Pharmacy**" then "**Online drug formulary.**" Then choose the formulary and the drug.

## 2 To process medical benefit prior authorizations for physician-administered drugs (including home infusion)

There are two ways to submit a prior authorization request for physician-administered drugs to Magellan Rx Management:

- **Electronic prior authorization web portal**
- **Call 1-800-424-1740 or fax 1-888-656-6671**

### Electronic prior authorization web portal

Fallon and Magellan Rx Management have made submitting PAs easy, quick, and convenient.

Providers should access Magellan's login page at [ih.magellanrx.com](http://ih.magellanrx.com).

- Please sign in
- Or choose "New User Request Access".

## 3 To process pharmacy benefit prior authorizations for patient self-administered drugs (including oral medications)

There are two ways to submit a prior authorization request to CVS Caremark:

- **Electronic prior authorization tool (ePA)**  
Fallon and CVS Caremark have made submitting PAs easy, quick and convenient, resulting in near real-time decisions.\* No faxes. No phone calls. The ePA tool is available at no cost to providers and their staff. CVS partners with CoverMyMeds & SureScripts, making it easier for you to access ePA through your vendor of choice.

*continued*

Using ePA, you can:

- Request clinical questions through your integrated EHR or the ePA website.
- Answer patient-specific clinical questions electronically and submit for review. To learn more and register, go to [info.caremark.com/epa](http://info.caremark.com/epa). (You'll need your NPI and DEA numbers.) You may also click the "ePA" link next to the drug name on our website.

*\*May not result in near real-time decisions for all prior authorization types and reasons.*

- **Call or fax**

To serve you quickly and efficiently, we have separate phone and fax numbers for our Medicare, Medicaid and commercial plans. **To determine which phone or fax number to use, find the member's plan name on their ID card and locate it in the chart below.** When faxing, please use the PA form indicated in the listing on the "Online drug formulary".

Plan type	Plan name	Phone	Fax
<b>Medicare Part D plans</b>	<ul style="list-style-type: none"> <li>• Fallon Medicare Plus™ HMO</li> <li>• Fallon Medicare Plus™ Central HMO</li> <li>• NaviCare®</li> <li>• Summit ElderCare®</li> </ul>	1-866-239-4707	1-855-633-7673
<b>MassHealth ACO plans</b>	<ul style="list-style-type: none"> <li>• Berkshire Fallon Health Collaborative</li> <li>• Fallon 365 Care</li> <li>• Wellforce Care Plan</li> </ul>	1-866-643-5126	1-855-762-5204
<b>Commercial plans</b>	<ul style="list-style-type: none"> <li>• Direct Care</li> <li>• Select Care</li> <li>• Fallon Preferred Care PPO</li> <li>• Fallon Medicare Plus™ Freedom</li> <li>• Fallon Medicare Plus™ Supplement</li> <li>• Steward Community Care</li> <li>• Community Care</li> </ul>	1-866-772-9538	1-888-836-0730
<b>Medicaid and Commercial plans – Specialty Drugs only</b>	<ul style="list-style-type: none"> <li>• All Commercial and Medicaid plans</li> </ul>	1-866-814-5506	1-866-249-6155
<b>Medicaid and Commercial plans – Opioid Program only</b>	<ul style="list-style-type: none"> <li>• Commercial plans</li> <li>• Exchange plans</li> <li>• Medicaid plans</li> </ul>	1-800-294-5979 1-855-582-2022 1-866-643-5126	1-866-217-5644

### To process Medicare glucose monitors and test strips prior authorizations

For **Medicare members only**, Fallon Health reviews Medicare **glucose monitor** and **test strip** requests. Please fax requests to 1-508-791-5101 or call 1-508-368-9825, option 5, option 2.

Requests are reviewed by order of arrival, with the exception of emergency medications, which are reviewed according to the urgency of the clinical situation. If the prior authorization is approved, the provider will be notified by fax. If the prior authorization is not approved, the provider will be notified by fax with reasons cited for the denial, alternative medications if indicated, a reference to the guideline and information on the appeals process.

### Questions?

Call Fallon Health's Provider Relations Department at

**1-866-275-3247**

[fallonhealth.org/providers](http://fallonhealth.org/providers)

