

Submitting authorization requests for pharmacy services

2022

Learning Objectives

- As a result of this webinar, you will be able to:
 - ✓ Locate the Pharmacy Information Authorization form 13-835A and instructions.
 - ✓ Submit your authorization request successfully using the authorization intake process.
 - ✓ Submit additional information to an existing request using a document submission cover sheet.
 - ✓ Check on the status of your request using the IVR.
- For additional information on the pharmacy authorization program see the [Prescription Drug Program Billing Guide](#).
- Visit the [pharmacy prior authorization webpage](#) for more resources!

Learning Objectives

- Understand the pharmacy and the prescribing physician's role in the prescription authorization process:
 - ✓ The dispensing pharmacy initiates the request using HCA's electronic form 13-835A - Pharmacy Information Authorization.
 - ✓ The prescribing physician sends in additional information using a document submission cover sheet, if notified.

ProviderOne Scanning Technology

- Optical Character Recognition (OCR)
 - ✓ OCR is the translation of scanned images of typed text into machine encoded text.
 - ✓ Widely used technology which converts documents into electronic files.
- Features of OCR
 - ✓ OCR makes it possible to search for a word or phrase, store documents more compactly, and display or print copies of documentation.
- OCR technology cannot be accurately read if there is any handwriting on the form.

Automated Intake Process

- Incoming Pharmacy Authorization requests will be automatically scanned into ProviderOne when:
 - ✓ The first page received is Pharmacy Information Authorization form 13-835A:
 - Do not use your own fax cover sheets.
 - ✓ The HCA Form is not modified:
 - Modified forms will fail the scanning process and delay processing.
 - ✓ Each authorization request has its own authorization form.
 - ✓ The faxed pages are set to size 8 ½ x 11.
 - ✓ The forms are typed and contain no handwritten information.

Authorization Form

- On-line [Pharmacy Information Authorization form 13-835A](#):
 - ✓ The form must be typed for scanning and efficient processing.
 - ✓ The PDF form can be easily filled in and printed.
 - ✓ Handwritten forms will be returned and not processed.
 - ✓ The form must be completed by the dispensing pharmacy and not the prescribing physician.
 - ✓ Directions on completing the information come with the form.
 - ✓ Requires the ProviderOne client ID, NPI and a Code Qualifier.
 - In addition to the above detail, the instructions on the back of the form call out each field that is a required entry.
 - Some entries are required conditionally, depending on the type of action being requested (i.e. update, or rate adjustment).

Pharmacy Information Authorization

Org	1.	Authorization Type	2.
Client Information			
Name	3.	Client ID	4.
	5.	Reference Auth #	6.
Provider Information			
Pharmacy NPI #	7.	Pharmacy Fax #	8.
Prescriber NPI #	9.	Prescriber Specialty	10.
Prescriber Phone #	11.	Prescriber Fax #	12.
Date of Fill:	13.	Dispense as Written (Yes/No)	14.
Service Request Information			
Drug Name, Strength and Form:		Actual per unit cost	AWP per unit cost
15.		18.	17.
18. RX#		19. Wholesaler	
20. Code Qualifier	21. Product ID	22. Qty	23. Days Supply
			24.
			25. Directions for Use (SIG)
			26. Prod Select Cd
Medical Information			
Diagnosis Code	27.	Diagnosis name	28.
Patient Residence	29.		
30. Comments:			

Please Fax this form and any supporting documents to 1-866-668-1214.

The material in this facsimile transmission is intended only for the use of the individual to whom it is addressed and may contain information that is confidential, privileged, and exempt from disclosure under applicable law. **HIPAA Compliance:** Unless otherwise authorized in writing by the patient, protected health information will only be used to provide treatment, to seek insurance payment, or to perform other specific health care operations.

Form 13-835A

PA Form Instructions and Tips

- Enter 512 for Prior Authorization of a prescription.
- Enter 522 for rates if you are requesting a reimbursement at less than cost and it's not dispensed as written (DAW).
 - ✓ DAW1 Requires prior authorization.
 - ✓ Complete rest of the form per instructions.

Org	1.	
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PA Form Instructions and Tips

- Fax prior authorization request forms to 1-866-668-1214.
- Remember:
 - ✓ Make sure the first page received is Pharmacy Information Authorization form 13-835A.
 - ✓ When faxing multiple requests, make sure form 13-835A is the first page of each request.
 - ✓ Do not use your own fax cover sheets.
 - ✓ Adjust your fax settings to 8 ½ x 11.
 - ✓ Do not modify the authorization form.
 - ✓ Only use the ProviderOne Client ID.

Document Submission Cover Sheets

- If more detail is needed related to the authorization request, the prescribing physician may receive a form requesting additional information.
- This must be completed and submitted to HCA using a document submission cover sheet.
- Cover sheets can be found on the [Document submission cover sheets web page](#).
- The appropriate cover sheet for pharmacy information is the [Pharmacy prior authorization supporting documents](#).

Document Submission Cover Sheets

The barcode cover sheet must include the reference number related to the authorization request. The reference number can be found on all correspondence from the health care authority.

This cover sheet cannot be handwritten.

ProviderOne

Pharmacy PA Supporting Documents Submission Cover Sheet

Pharmacy RX Auth Reference

(Please enter 8 to 11 digit numeric value.)

Print Cover Sheet Clear Fields

Instructions will not appear on the printed coversheet

INSTRUCTIONS:
Click ENTER on your keyboard after typing the number in above.
Please use the Print Cover Sheet Button Above to print ONLY.
Use Only ADOBE Reader to generate this coversheet. Other readers will not generate the barcode correctly.

Document Submission Cover Sheets

- You must submit a separate HCA cover sheet for each set of supporting documentation.
- If faxing multiple sets of supporting documentation, make sure the cover sheet is the top page separating each request.
- If mailing several in one envelope, make sure the cover sheet is the top page of each request.
- Backup documentation must be single sided and size 8 ½ x 11.

Document Submission Cover Sheets

- You can save the link or URL to the document submission cover sheet as a “Favorite,” but be sure to always get them real-time from the [HCA webpage](#) to make sure you’re using the correct version.
- Do not save the actual cover sheet to your desktop and attempt to reuse it.
- Do not use an HCA document submission cover sheet when submitting the original authorization request form.

Checking status using the IVR

- Call 800-562-3022 and use keypad only:
 - ✓ Select 1 for English or stay on the line
 - Select 2 for self-service provider menu
 - Select 1 for authorization
 - Select 1 for pharmacy authorizations
 - Enter NPI when prompted
 - Select 2 for get status
 - Choose option 1 to search by authorization number
 - Choose option 2 to search by client ID/date of birth
- If multiple authorization numbers are found, narrow the search with a service code or expected date of service.
- For more information on using the IVR for checking status, review [Appendix G](#) of the ProviderOne Billing and Resource Guide.

Checking status using the IVR

- Statuses that may be returned:
 - ✓ Received
 - ✓ Approved
 - ✓ Pended
 - ✓ Denied

Resources

- For questions, call the toll-free number 800-562-3022:
 - ✓ Choose extension 15483 for Pharmacy Authorizations (providers only)
 - ✓ Choose extension 16135 for Pharmacy Rate Authorizations (pharmacies only)
- [Pharmacy program webpage](#)
- [Pharmacy prior authorization webpage](#)
- [Prescription Drug billing guide and rates](#)
- [Fee-for-service drug coverage lists](#)