
Second Opinion Review Process:

Fee for Service Clients

1. Medication is prescribed.
2. Client attempts to fill the prescription at the Pharmacy, the pharmacy receives a claim rejection for exceeding established thresholds:
 - Age/Dose
 - [Atypical Antipsychotics](#)
 - [ADHD](#)
 - [Alpha Agonist](#)
 - [Sedative Hypnotics \(Insomnia\)](#)
 - Therapeutic Duplications
 - [Atypical Antipsychotics](#)
 - [ADHD](#)
 - [Antidepressants](#)
 - Polypharmacy (five or more psychotropic medications)
3. Pharmacy contacts the Health Care Authority (HCA) to start the authorization request.
4. If the pharmacy does not provide all of the necessary documentation, HCA contacts the prescriber(s) to obtain the missing documentation.
5. Once the prescriber(s) return the requested documentation, HCA submits the request to Seattle Children's Hospital Second Opinion Network (SON).
6. SON schedules a peer to peer consult with the prescriber(s) involved.
7. SON and the prescriber(s) consult; the discussion and recommendation(s) are documented in a Second Opinion Review.
8. SON sends the Second Opinion Review to HCA.
9. HCA documents all recommendation(s) and approves or denies as needed.
10. HCA communicates decisions to the prescriber, client, and pharmacy.

Managed Care (MCO) Clients

1. Medication is prescribed.
2. Member attempts to fill the prescription at the Pharmacy, the pharmacy receives a claim rejection for exceeding established thresholds*:
 - Age/Dose
 - [Atypical Antipsychotics](#)
 - [ADHD](#)
 - [Alpha Agonist](#)
 - [Sedative Hypnotics \(Insomnia\)](#)
 - Therapeutic Duplications
 - [Atypical Antipsychotics](#)
 - [ADHD](#)
 - [Antidepressants](#)
 - Polypharmacy (five or more psychotropic medications)
3. If a claim rejection happens at the pharmacy, the pharmacy or the prescriber must contact the MCO to start the authorization request.
4. If the MCO needs additional information the prescriber(s) are contacted to obtain the documentation.
5. Once the prescriber returns the requested documentation, the MCO sends the request to the HCA.
6. HCA reviews all documentation and verifies if a previous SON review is on file or if a new review is needed.
7. If a review is needed HCA submits the request to the SON.
8. SON schedules a peer to peer consult with prescriber(s) involved.
9. SON and the prescriber(s) consult; the discussion and recommendation(s) are documented in a Second Opinion Review.
10. SON sends the Second Opinion Review to HCA.
11. HCA validates and documents all recommendation(s).
12. HCA sends the recommendations and a copy of the Second Opinion review to the MCO.
13. HCA sends a copy of the Second Opinion review to the prescriber(s) involved.
14. MCO creates authorizations and/or denials, and communicates decisions to the prescriber, client, and pharmacy.

* Some SON reviews are started when the MCO analyzes reports that show a claim history exceeding thresholds.