# Compass Med D - Tiering Exceptions

[Eligibility](#_Toc202437696)

[Creating a request for a Tiering Exception](#_Toc202437697)

[Identifying a Tiering Exception Status in Compass](#_Toc202437698)

[Previously Paid Claim before Exception](#_Toc202437699)

[Related Documents](#_Toc202437700)

**Description:** Use for **Tiering Exceptions** which is a beneficiary’s request to pay a lower cost share for a covered medication.

|  |
| --- |
| Eligibility |

Certain criteria must be met for a **Tiering Exception** to be approved as they are not allowed for all drugs. A beneficiary can request an exception regardless of the drug being eligible.

Who can file a **Tiering Exception**?

Refer to Authorized Persons Who Can Start or Check the Status of a Coverage Determination or Redetermination section of [Compass MED D - CCR - Coverage Determinations and Redeterminations (Appeals) (064997)](https://thesource.cvshealth.com/nuxeo/thesource/#!/view?docid=a23bc09d-37f7-4105-ba57-d4e9d7f512ff).

To be eligible for a **Tiering Exception**, the following items may need to be met:

* The requested drug can **NOT** be previously approved through a formulary exception.
* The plan must have a non-preferred tier.
* The requested drug must be on the non-preferred brand tier or the non-preferred generic tier.
* If the requested drug is a non-preferred brand, there must be a preferred brand in the same class. If the drug requested is a non-preferred generic, there must be a preferred generic in the same class.
* Generic drugs from a higher tier are eligible for a **Tiering Exception** to the Preferred Generic tier.
* Brand drugs will be eligible for a **Tiering Exception** to the Preferred Brand Tier.

**Exceptions to this policy:** Brand and generic drugs residing on the Specialty tier; and, drugs for which a formulary exception has been granted. These two exceptions are excluded from a tiering exception by way of CMS guidance. If a member persists, they want to request a **Tiering Exception**, we must initiate and review.

An approved **Tiering Exception** is applicable to the Initial Coverage Limit (ICL) phase except the deductible & catastrophic phases.

Icon%20-%20Important%20Information **Notes:**

* When a beneficiary needs a medication and is complaining about the cost, this is considered a potential **Tiering Exception**.
* If a beneficiary cannot afford a medication, refer to [Compass – Viewing and Running Test Claims for Alternative Rx(s) (056849)](https://thesource.cvshealth.com/nuxeo/thesource/#!/view?docid=b3dbfb44-1c9e-47a6-b8f4-6010f553731b)  to find potential lower cost alternatives. If the beneficiary states they are not able to take the alternative and need the medication being discussed, they are requesting a lower cost and a **Tiering Exception** should be initiated.
* CCRs **must** run a test claim every time an override is entered into Compass.
  + In situations where an override is being entered while speaking with a pharmacy representative, staff **must** run a successful test claim **prior** to advising the pharmacy to process the claim.

[Top of the Document](#_top)

|  |
| --- |
| Creating a request for a Tiering Exception |

**Icon_-_Important_Information If a beneficiary has a non-formulary exception, then a tiering exception cannot be requested.**

Follow the process below:

|  |  |  |
| --- | --- | --- |
| **Step** | **Action** | |
| **1** | Determine if the beneficiary has previously requested a **Tiering Exception** for the drug in question: | |
| **If…** | **Then…** |
| The drug was not reviewed for a Tiering Exception | 1. Discuss with the beneficiary for them to speak to their prescribing physician. Their physician will be required to submit a clinical statement to support the exception request.    * Initiate a Coverage Determination (CD) From Test Claim Result:  Standard Coverage Determination.  Refer to [Compass MED D - CCR - Coverage Determinations and Redeterminations (Appeals) (064997)](https://thesource.cvshealth.com/nuxeo/thesource/#!/view?docid=a23bc09d-37f7-4105-ba57-d4e9d7f512ff). 2. Determine if the beneficiary has an open order for their medication.    * If so, ask the beneficiary if they would like to place that order on-hold until a determination has been made on the **Tiering Exception**.      + If the beneficiary would like to place the medication on hold:   1. Place the order on Indefinite Hold.  2. Educate the beneficiary that they will have to call back once the **Tiering Exception** is approved so we can release their medication. Refer to [Compass - Placing/Releasing a Prescription (Rx) in Process on Hold/From Hold (056362)](https://thesource.cvshealth.com/nuxeo/thesource/#!/view?docid=46478c4b-48ae-4502-b66c-222e1ca37ce3) |
| The drug was reviewed for a Tiering Exception | If a **Tiering Exception** has been denied, determine if an appeal (redetermination) has been initiated. Refer to [Compass MED D - CCR - Coverage Determinations and Redeterminations (Appeals) (064997)](https://thesource.cvshealth.com/nuxeo/thesource/#!/view?docid=a23bc09d-37f7-4105-ba57-d4e9d7f512ff). |

[Top of the Document](#_top)

|  |
| --- |
| Identifying a Tiering Exception Status in Compass |

Perform the steps below:

|  |  |  |
| --- | --- | --- |
| **Step** | **Action** | |
|  | Determine if the caller is checking on a **Tiering Exception** Status. | |
|  | From the **Claims Landing Page**, access the **Override/PA History** hyperlink in the **Quick Actions** panel. | |
|  | Check the **Drug Name/Drug Type/Description**, **Effective**, and **Expiration** columns for the GPI of the medication the caller is checking status on.    **Note:** If a drug is not listed, or effective/expiration dates are not visible, the Override may be pending. Proceed to Step 7. | |
|  | In the **ID** column, click the **ID** hyperlink.    **Result:** The PA details pop up displays. | |
|  | Review the **Notes** field to determine if a Tiering Exception was submitted. (Do not read to caller.)  **Tip:** Utilize the keyboard shortcut **Ctrl + F** to look for keywords **Tiering** or **Tier**. | |
|  | Determine the status. | |
| **If the Tiering Exception…** | **Then…** |
| Is NOT found in Compass | Inform the caller that there is no Tiering Exception on file. Educate the caller on the process for requesting. |
| Is in progress | Inform the caller of the current status of the Tiering Exception. |
| Is approved or denied | Inform the caller of the approval or denial and next steps.  **Examples:**   * **Approved:** The Tiering Exception for <medication name> has been approved for <provide number of months>. * **Denied:** I understand that obtaining the medication is important. The Tiering Exception has been denied. Please follow up with the prescriber for an explanation. Beneficiaries may choose to pay out of pocket for the medication or discuss alternative medications with their prescriber. If you’d like, I’ll be happy to search for potentially cost-saving alternatives.   + Create a Support Task for CD&A; refer to [Compass MED D - CCR - Coverage Determinations and Redeterminations (Appeals) (064997)](https://thesource.cvshealth.com/nuxeo/thesource/#!/view?docid=a23bc09d-37f7-4105-ba57-d4e9d7f512ff).Beneficiaries have the right to request an appeal (redetermination), also referred to as a redetermination, if they have been denied a **Tiering Exception**. Refer to [Compass MED D - CCR - Coverage Determinations and Redeterminations (Appeals) (064997)](https://thesource.cvshealth.com/nuxeo/thesource/#!/view?docid=a23bc09d-37f7-4105-ba57-d4e9d7f512ff). |

[Top of the Document](#_top)

|  |
| --- |
| Previously Paid Claim before Exception |

For beneficiaries sending in the information of previously paid claims that were purchased prior to an approved exception being in place, follow the steps below:

|  |  |
| --- | --- |
| **Step** | **Action** |
| **1** | Send the beneficiary the Rx Claim Form; refer to [Compass MED D - Researching and Submitting Paper Claims (061799)](https://thesource.cvshealth.com/nuxeo/thesource/#!/view?docid=59458286-c3a2-4924-9f92-7a55cb5defb9).  **Note:** Inform the beneficiary that the ETA is 45days. |
| **2** | In the case that a beneficiary received medications via mail order, submit a Support Task to reverse and reprocess this claim to reimburse the beneficiary. Refer to as needed.  **Note:** The following details will need populating:   * Order Number * Prescription Number * Drug name * Fill Date for the prescription in question * If there is a balance for the order that is being reversed and reprocessed, the beneficiary will receive a check to pay off the difference, but beneficiary is still responsible for paying off their portion of the difference. If there is no balance in transaction history, the beneficiary will receive a reimbursement check. |

[Top of the Document](#_top)

|  |
| --- |
| Related Documents |

**Parent Document:** [CALL-0011](https://policy.corp.cvscaremark.com/pnp/faces/DocRenderer?documentId=CALL-0011)

**Abbreviations/Definitions:**[Customer Care Abbreviations, Definitions, and Terms Index (017428)](https://thesource.cvshealth.com/nuxeo/thesource/#!/view?docid=c1f1028b-e42c-4b4f-a4cf-cc0b42c91606)

[Top of the Document](#_top)

Not To Be Reproduced Or Disclosed to Others Without Prior Written Approval

**ELECTRONIC DATA = OFFICIAL VERSION – PAPER COPY – INFORMATIONAL ONLY**