# Prior Authorization or Clinical Exception Urgent, Duplicate, and Back Dating Requests

[Prior Authorization or Clinical Exception Urgent Requests](#_Toc197006212)

[Prior Authorization or Clinical Exception Review Process Duplicate Requests](#_Toc197006213)

[Prior Authorization or Clinical Exception Back Dating Requests](#_Toc197006214)

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**Description:** Provides process and information on Prior Authorization or Clinical Exception urgent, duplicate, and back dating requests for Compass and PeopleSafe users.

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| Prior Authorization or Clinical Exception Urgent Requests |

Use this when a PA or Clinical Exception request is urgent. These steps can be performed at any time during the process.

**Reminder:** For any urgent requests that are escalated in nature, seek assistance from the Senior Team.

* For **PeopleSafe** users, refer to [PeopleSafe - When to Transfer Calls to the Senior Team (016311)](https://thesource.cvshealth.com/nuxeo/thesource/#!/view?docid=9eef064d-c7d7-42f7-9026-1497496b4d51)
* For **Compass** users, refer to [Compass - When to Transfer Calls to the Senior Team (057524)](https://thesource.cvshealth.com/nuxeo/thesource/#!/view?docid=7653e7c2-1a97-42a0-8a81-6267c72e1ca9)

**Examples:** Member is running out of medication, Member is out of medication, or Member is immediately asking us to contact their prescriber.

*  You may provide the PA phone number from the rejected claim for the prescriber to call and submit a verbal request. If there is no phone number in the reject, you may provide **1-800-294-5979**. Verbal requests can take up to 24 hours to process ONCE all information from provider is received. It is **ONLY** considered urgent if the prescriber indicates “URGENT” on the faxed document(s), or over the phone states it is urgent in nature. DO NOT proactively advise members to tell their Dr. to submit requests as urgent.

 For Commercial Prior Authorization requests for **Specialty** medications, refer to the system appropriate steps below as specialty has their own process.



* + For **PeopleSafe** users, refer to [PeopleSafe - Specialty Pharmacy (CTS – Caremark Therapeutic Pharmacy Services) Call Handling (007148)](https://thesource.cvshealth.com/nuxeo/thesource/" \l "!/view?docid=2eb2f621-bbbb-4e0e-9189-6b47d44f42b3)
  + For **Compass** users, refer to [Compass - Specialty Pharmacy (CTS - Caremark Therapeutic Pharmacy Services) Call Handling (058175)](https://thesource.cvshealth.com/nuxeo/thesource/#!/view?docid=845064bd-8ae0-4d30-af0a-e21d6d81933c)

Follow the steps below:

|  |  |  |
| --- | --- | --- |
| **Step** | **Action** | |
| **1** | Run a Test claim.   * For **PeopleSafe** users, refer to [PeopleSafe - Test Claim (004573)](https://thesource.cvshealth.com/nuxeo/thesource/#!/view?docid=59c4e7fa-4a87-43c4-89cd-5d4f8c6c3421) * For **Compass** users, refer to [Compass - Test Claims (050041)](https://thesource.cvshealth.com/nuxeo/thesource/#!/view?docid=60c20ea0-1d07-46e3-809a-b54734b80fbe) | |
| **2** | Review the CIF to determine if Caremark handles the PAs or Clinical Exceptions. | |
| **If…** | **Then…** |
| Yes  **and**  Speaking with the prescriber or a representative from the prescriber’s office | Transfer the call to the PA Team using the number from the rejected claim by following the warm transfer procedures.  **Note:** If there is no phone number in the reject, you may provide **1-800-294-5979**. |
| Yes  **and**  Speaking with the member | You may provide the PA phone number from the rejected claim for the prescriber to call and submit a verbal request. If there is no phone number in the reject, you may provide **1-800-294-5979**.   * **Note:** Verbal requests can take up to 24 hours. It is ONLY considered urgent if the prescriber indicates “URGENT” on the faxed document(s), or over the phone states it is urgent. DO NOT proactively advise members to tell their Dr. to submit requests as urgent. |
| No | Follow CIF instructions for Prior Authorizations or Clinical Exceptions to educate the member on the PA process for their plan.  Please follow up with your prescriber for the determination of your Prior Authorization request. |

**Prescribers’ After-Hours Process:** In case of disconnect, provide the PA phone number to the prescriber from the rejected claim and cold transfer.

* If there is no phone number in the reject, you may provide **1-800-294-5979**. The PA process can take up to 24 hours depending on the criteria. The prescriber may also submit an ePA request on <https://www.covermymeds.com/epa/caremark/>.

If initiated by ePA, the prescriber will receive immediate notification via CoverMyMeds, and they receive a fax within 15 minutes of determination. The member letter is mailed within 24 hours.

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| Prior Authorization or Clinical Exception Review Process Duplicate Requests |

The following table provides scenario information regarding the process when duplicate prior authorization requests are received.

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| --- | --- |
| **If...** | **Then...** |
| The Prior Authorization Department receives a second request for the same drug within the timeline for appeal listed on the denial letter | A new request will be opened.  **Note:** The request will not be forwarded to Appeals unless specifically requested by the sender. |
| Additional request is received, or appeal is specifically requested for the same drug within the timeline for appeal listed on the denial letter | Request is forwarded to Appeals (if our PBM handles the appeal process). |
| Prior Authorization Department receives a new request for the same drug, after the timeline for appeal listed on the denial letter | A new PA or Clinical Exception is opened and worked. |

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| Prior Authorization or Clinical Exception Back Dating Requests |

Refer to the following when a member or prescriber requests that a PA or Clinical Exception be backdated for retroactive coverage:

**Notes:**

* The maximum time that the PA Dept can backdate is 30 days, which depends on the client and how far back the plan allows.
* If the date change request is beyond 30 days, and if the CIF allows, then that request must be sent to the account team for approval via salesforce case.
* There are clients who do not allow backdates of any kind on a PA or Clinical Exception, and this process may require an appeal.
* For Commercial Prior Authorization requests for Specialty medications, refer to the system appropriate steps below as specialty has their own process.
  + For **PeopleSafe** users, refer to [PeopleSafe - Specialty Pharmacy (CTS – Caremark Therapeutic Pharmacy Services) Call Handling (007148)](https://thesource.cvshealth.com/nuxeo/thesource/" \l "!/view?docid=2eb2f621-bbbb-4e0e-9189-6b47d44f42b3)
  + For **Compass** users, refer to [Compass - Specialty Pharmacy (CTS - Caremark Therapeutic Pharmacy Services) Call Handling (058175)](https://thesource.cvshealth.com/nuxeo/thesource/#!/view?docid=845064bd-8ae0-4d30-af0a-e21d6d81933c)

Refer to the following:

|  |  |  |  |
| --- | --- | --- | --- |
| **Step** | **Action** | | |
| **1** | Review the CIF to determine if the client allows backdating. | | |
| **If…** | **Then…** | |
| Yes | Review the CIF to determine if we handle the PA or Clinical Exception. | |
| **If…** | **Then…** |
| Yes | Warm transfer the caller to the PA department using the number from the rejected claim.  **Note:** If there is no phone number in the reject, you may provide **1-800-294-5979**. |
| Yes and beyond 30 days | The request must be sent to the account team for approval via Salesforce case. Contact the Senior Team for assistance. |
| No | Review the PA or Clinical Exception information listed in the CIF with the caller and follow process listed. |
| No | Advise the caller that the plan doesn’t allow backdating.   * If the member is persistent, submit an ePA. (CoverMyMeds will automatically process for PA or Clinical Exception based on plan requirements.) | |
| Not listed | Reach out to the PA team at the number from the rejected claim to verify.   * If there is no phone number in the reject, call **1-800-294-5979**. | |

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| Related Documents |

[Compass - Prior Authorization, Exceptions, Appeals Guide (063978)](https://thesource.cvshealth.com/nuxeo/thesource/" \l "!/view?docid=657ddfe3-27d1-4a21-8f51-8cbd3961001c" \t "_blank)

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

**Parent Document:**[CALL 0049 Customer Care Internal and External Call Handling](https://policy.corp.cvscaremark.com/pnp/faces/DocRenderer?documentId=CALL-0049)

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