

Phil Platform Guide – Processing Status Dictionary 2.0

The processing statuses in the data dash are represented in one column with high level statuses to help determine what phase an order is in. Additionally, if Phil is waiting for any other party to continue processing the order, a sub-status will also be listed in the next column to reflect any pending actions or additional granularity for an order before moving forward. The sub-status will remain blank if the order is within the typical workflow steps for the order status.

In Progress: Script Review

As soon as we receive a script from a provider, we will review the script, ask the patient or the prescriber for clarifications if needed and prepare to ask the patient to enroll.

Possible Sub-statuses:

- ❖ **Clarification with Patient about information provided:** PhilRx is communicating with the patient as more information from the patient is needed to proceed with the order such as confirming date of birth, last name, spelling of name, etc.
- ❖ **Following up with Patient about contact info:** PhilRx is communicating with the patient via an alternate method because the initial SMS to enroll failed to send to the patient.

In Progress: Patient Enrollment

PhilRx is waiting for the patient to confirm insurance information, delivery address, and coupon enrollment authorization. Required for Rx processing.

Possible Sub-statuses:

- ❖ **Need Patient HIPAA Authorization:** Patient either declined or hasn't accepted the HIPAA authorization (if applicable for the program).
- ❖ **Need Patient Coupon Enrollment:** During the My.Phil enrollment, the patient did not enroll in the coupon. At this step, we are waiting for the patient to enroll in the coupon (only applicable if the coupon is required for the program).
- ❖ **Following up with Patient about contact info:** PhilRx is communicating with the patient via an alternate method because the initial SMS to enroll failed to send to the patient.
- ❖ **Need Patient Info from Prescriber:** PhilRx is waiting for the HCP to provide necessary information for initial Rx processing - this can include patient's contact information.

In Progress: Obtaining Coverage

The patient has completed enrollment and provided their insurance. During this step, PhilRx is verifying the patient's insurance information and/or verifying the medication price, initiating PAs or Appeals when applicable, then transferring the prescription to an appropriate partner pharmacy.

Possible Sub-statuses:

- ❖ **Need chart notes from prescriber:** Prior Authorization has been submitted; the payer is requesting chart notes from HCP to determine the outcome.
- ❖ **Need ICD-10/TF From prescriber:** The payer needs the ICD-10 or Tried and Failed documentation to complete the determination of a prior authorization (PA), tier exception (TE), or formulary exception (FE).
- ❖ **Need PA submission from prescriber:** Prior Authorization has been prepared and MD notified; pending MD submission.
- ❖ **Need appeal submission from prescriber:** Appeal has been prepared and MD notified; pending MD submission.
- ❖ **Need TE submission from prescriber:** Tier Exception has been prepared and MD has been notified; pending MD submission.
- ❖ **Need FE submission from prescriber:** Formulary Exception has been prepared and MD has been notified; pending MD submission.
- ❖ **Need PA determination from Payer:** The PA has been submitted by the MD and the outcome is waiting on the insurance company.
- ❖ **Need appeals determination from Payer:** The Appeal has been submitted by the MD and the outcome is waiting on the insurance company.
- ❖ **Need TE determination from Payer:** The Tier Exception has been submitted by the MD and the outcome is waiting on the insurance company.
- ❖ **Need FE determination from Payer:** The Formulary Exception has been submitted by the MD and the outcome is waiting on the insurance company.
- ❖ **PAP in progress:** Patient Assistance Program (PAP) application was initiated by PhilRx. (Only applicable when a patient assistance program is offered.)
- ❖ **Need Rx substitution from prescriber:** Either the prescriber or patient has requested an alternate medication and we are awaiting the Rx substitution from the MD.
- ❖ **Waiting on patient insurance info:** PhilRx is waiting for the patient to provide their insurance information. During the patient enrollment process, the patient indicated the insurance information Phil has on file is not their current insurance and has opted to provide new insurance information via

the Phil platform or SMS.

- ❖ **Need Patient Coupon Enrollment:** The patient didn't enroll in the coupon during the My.Phil enrollment. At this step, we are following up with the patient to enroll in the coupon.

In Progress: Payment Approval

The prescription co-pay is available for patient review. The patient provides credit card and payment approval to initiate shipment.

Possible Sub-statuses: *No specific sub statuses for this milestone order status*

In Progress: Preparing to Ship

The prescription is being dispensed and prepared to ship to the patient. An order will stay in this status while awaiting the carrier to pick up the package as well.

Possible Sub-status:

- ❖ **Following up with patient on payment issue:** The original payment method the patient provided failed. Rx shipping is pending for the patient to upload new or corrected payment information.
- ❖ **Awaiting Carrier Pickup:** The prescription is packaged, ready to ship and awaiting the next carrier pickup time.

Fulfilled: Shipped by Phil

The Rx has been shipped to the patient.

Possible Sub-statuses:

- ❖ **Open question with patient: Delivery failed:** There was an issue with delivery that we are trying to sort with the patient. Examples may include a failed delivery or a returned package.
- ❖ **Following up with patient for delivery:** In some cases we will reach out to the patient to ensure they received their order.
- ❖ **Patient requested refund:** In some cases, a refund will be issued to the patient.

Some common reasons Phil would issue a refund would be:
Lost/missing shipment and the patient does not want a replacement or the patient returns the medication (they didn't want the refill).

Paused by Patient

A patient may choose to pause or reschedule their order. Paused Rx status could be due to a variety of reasons: Patient does not need a refill at this time and pending prescriber or patient actions. Pausing halts prescription processing, but a patient can unpause a prescription at any time through their MyPhil account or by reaching out to PhilRx's Patient Support team.

Possible Sub-statuses:

- ❖ **Rescheduled until [date]**- If a patient decides to reschedule an order until a later time, the status will show as rescheduled along with the date they rescheduled to.

Refill Not Due

If it is too early for the patient to refill their prescription, the order will remain in this order status until the refill date provided in the sub-status. This can be due to the prescription having a claim open at another pharmacy or if the patient picked up the prescription within the last 30/90 days.

Possible Sub-statuses:

- ❖ **Refill not due**- This sub-status brings visibility on the updated refill date and the day this order may move from this status again.

Pended

A prescription may be pended based on varying thresholds of inactivity, but can be un-pended if the issue is resolved.

Possible Sub-statuses:

- ❖ **Pended: Insurance exception** - the order had an insurance exception after an extended period of time.
- ❖ **Pended: Payment exception** - the order had a payment exception after an extended period of time (i.e. credit card failed and patient has not responded to requests to update).

- ❖ **Pended: Patient decision** - only applicable for specific programs when Phil is waiting on the patient to determine if they want to fill through Phil or another method.
- ❖ **Pended: Prescriber action** - the order is waiting for the prescriber to take an action.
- ❖ **Pended: Coverage denied** - only applicable for specific programs when an order cannot be filled if coverage is ultimately denied by the insurer.
- ❖ **Pended: No enrollment response** - the patient has not enrolled with phil after an extended period of time.
- ❖ **Pended: No payment approval** - the patient has not approved their payment after an extended amount of time.
- ❖ **Pended: Refill denied** - during refill authorization, the prescriber denied more refills due to various reasons such as needing an office visit, the patient no longer taking the prescription or if there is no response from the prescriber.
- ❖ **Pended: No refill request** - the patient no longer has refills remaining, but the prescriber has requested that we don't prompt them for refill authorization.
- ❖ **Pended: Pharmacies not contracted** - the patient's insurance is not contracted with any pharmacy in the Phil network, so we have contacted the patient to transfer their prescription to a local pharmacy of their choice.

Archived

The prescription has been canceled or was not moved forward in the process by either the patient or HCP. Many subcategories of the Archived status exist to provide additional data.

Possible Sub-statuses:

- ❖ **Archived: Transfer Out - SP Mandated Transfer** - The order went through a payer that required the script to be fulfilled by a specific payer mandated speciality pharmacy
- ❖ **Archived: Transfer Out - Patient Canceled** - The patient has requested to cancel their prescription
- ❖ **Archived: Transfer Out - Pharmacy Not Contracted** - There is no partner pharmacy within the Phil network that is contracted with the payer.
- ❖ **Archived: Transfer Out - Patient Local Pickup Transfer** - The patient opted to pick up the medication at a local pharmacy of their choice instead of using Phil (if applicable per program).
- ❖ **Archived: Transfer Out - Other** - Can include various reasons that the order was transferred from Phil other than the specific transfer out reasons.
- ❖ **Archived: Patient Unresponsive** - The prescription has been archived due to

patient unresponsiveness. Three distinct categories below:

- **Archived: Patient Unresponsive-Enrollment** - The patient has not completed enrollment for more than 14 calendar days
- **Archived: Patient Unresponsive-Payment** - The patient has not approved their copay for more than 14 calendar days
- **Archived: Patient Unresponsive-PAP** - The patient has not responded since the PAP was initiated for more than 14 calendar days.
- ❖ **Archived: No refills** - The prescription was archived due to not having any refills on file.
- ❖ **Archived: Duplicate Rx** - Received a duplicate alternate prescription.
- ❖ **Archived: Alt med Prescribed - HCP** - The prescriber has canceled the prescription and will be prescribing the patient with an alternative medication.
- ❖ **Archived: Govt Insurance cannot be filled** - Order was archived due to government insurance (only applicable if manufacturer's business rules do not accept government insurance scripts).
- ❖ **Archived: No Prescriber Response** - The HCP has been unresponsive to providing missing information after 14 calendar days.

General Sub-statuses - can appear in any order status milestone:

- ❖ **Open question with patient for transfer:** Once the order is determined it needs to be transferred out of Phil, we will wait for the patient to provide their location of choice to transfer the prescription to.
- ❖ **Following up with patient about communications:** The patient may have unsubscribed. Our support team will reach out to the patient to make sure they can still receive important communications.
- ❖ **Open question with patient:** If we have any miscellaneous questions or clarifications for a patient that aren't more specifically detailed in other statuses, an order may show this status.
- ❖ **Open question with prescriber:** If we have any miscellaneous questions or clarifications for a prescriber that aren't more specifically detailed in other statuses, an order may show this status.
- ❖ **Transfer in progress:** PhilRx is the process of transferring the script from Phil for various reasons. Once the transfer is complete, the status will show as archived with the transfer reason.
- ❖ **Need Rx Clarification from Prescriber:** PhilRx is waiting for the HCP to provide necessary information for initial Rx processing - this can include Rx-related information such as instructions for use ("sig"), quantity, or days of supply.
- ❖ **Need Patient Info from Prescriber:** PhilRx is waiting for the HCP to provide necessary information for initial Rx processing - this can include patient's

contact information.

- ❖ **Need Info from Prescriber- Other:** PhilRx is waiting for the HCP to provide necessary information for initial Rx processing - this can include miscellaneous missing or invalid info.

Next Fill Statuses - will appear if there is an update on an order after it ships and before the next refill order is started:

- ❖ **Archived (Detailed Reason):** The order has been archived after it was shipped and a refill will not be processed for the patient. See the Archived section for additional explanation on the archive reasons.
- ❖ **Active: Next Refill (Date):** The order is still active and a refill will begin processing on the date listed.
- ❖ **Rescheduled by Patient until (Date):** The patient chose to reschedule their order until a date farther in the future. The refill will begin to process on the date indicated by the patient.
- ❖ **Patient Paused:** A patient may choose to pause or reschedule their order. Paused Rx status could be due to a variety of reasons: Patient does not need a refill at this time and pending prescriber or patient actions. Pausing halts prescription processing, but a patient can unpause a prescription at any time through their MyPhil account or by reaching out to PhilRx's Patient Support team.
- ❖ **Pended: (reason) (Date):** The order has been pended as there is an issue processing the next refill. See the Pended section for additional information on the pended reasons.
- ❖ **No refills/ refill auth:** After the patient's last fill, if applicable, Phil will reach out to the prescriber to obtain additional refills for the patient. If additional refills are not authorized, the one of following detailed reasons will be listed:
 - **Need Office Visit** Patient needs to see their provider in order for them to authorize more refills
 - **No longer taking Medication** HCP indicated to Phil the patient is no longer taking the medication
 - **Patient not on file** The patient is no longer seeing this HCP
 - **No response from MD** The HCP was unresponsive to the refill request
 - **Prescriber preference no refill authorizations** The HCP prefers not to be contacted by Phil for refills
 - **Refill denied** The prescriber denied the refill request and did not

provide a specific reason for the denial

- **Refills not applicable** Refills are not applicable for this patient or medication