

[Demo] NLP Dataset for Customer Service Automation

Company Type	Health Insurance Companies
Inquiry Category	Coverage determination and eligibility queries
Inquiry Sub-Category	Prescription drug coverage
Description	Customers seek clarity on the coverage of prescription medications, including formulary lists, copay amounts, prior authorization requirements, or alternatives in case a medication is not covered.
Data Size	6,321 paraphrases
Want to buy data?	Please contact nlp-data@gross.me via your business email address.

Masked sample paraphrases of one "Health Insurance Company" customer inquiry. (Purchased data will not be masked.)

Are ____ any ____ that are covered ____ mine ____ not ____?

If my ____ approved, ____ coverage for alternative ____?

____ alternate medicines funding once rejected?

If ____ aren't ____ you ____ alternate ____?

If I ____ get ____ any other ____ meds ____?

Can I get ____ disapproved?

____ my medication is ____ what ____ options ____?

____ wonder if I ____ different medicines ____ rejected.

____ the alternative covered if ____ is ____?

Is ____ possible that alternative ____ if ____ approved?

____ there ____ B for non-approved ____?

____ backups for ____ medications?

____ not approved, ____ can be ____?

____ possible ____ to access different ____ it's rejected?

If ____ medication ____ approved, ____ the ____ covered?

____ it ____ approved, ____ other covered ____ available?

Is ____ substitute drugs ____ under ____ if the ____ prescribed ____ approval?

____ medication ____ any other options?

____ my medication isn't ____ drugs?

Is ____ coverage ____ case my medication isn't ____?

____ like to know if other meds ____ covered ____ I ____.

If mine ____ there ____ other ____.

____ my medication ____ approved, ____ there be any ____?

Will you pay ____ an ____ replacement drug if ____?

____ case of ____ alternate ____ provided?

____ isn't approved, ____ other covered drugs ____ available?

Can ____ use ____ different ____ is not approved.

Any ____ in the ____ my ____ is ____?

What alternative _____ their _____ if they _____?
 If _____ denied approval, are _____ substitute drugs _____?
 _____ else I can _____ I _____ get approval?
 _____ occurs, any _____ drugs _____ provided?
 _____ there _____ other _____ I don't get approved?
 _____ one prescribed is _____ approval, _____ substitute drugs _____ me?
 In case my _____ denied, _____ provide alternative _____?
 Does _____ prescriptions _____ denied?
 Is _____ replacement _____ handled _____ of approval?
 If mine _____ approved, _____ replacement _____?
 _____ case _____ disapproval, _____ any alternate _____?
 If my prescription _____ be an alternative _____?
 _____ approved, is _____ coverage for alternative pills?
 If my medication _____ there alternatives?
 What _____ enjoy _____ if _____ refuse _____?
 In the event that _____ get _____ for _____ medications?
 Should _____ drugs be _____ case _____ disapproval?
 _____ any _____ meds get _____ denial of _____?
 what alternative _____ coverage _____ mine?
 If it's _____ approved, _____ replacement _____?
 _____ any other _____ are _____ if _____ isn't approved?
 _____ my _____ is denied, _____ an _____ be given?
 _____ my _____ aren't approved, any _____ covered _____ are _____?
 _____ my _____ aren't _____ are there _____ alternatives?
 _____ alternative medicines _____ coverage _____ refuse _____?
 Is _____ when mine _____ authorized?
 _____ funded in case my treatment is _____?
 _____ am not authorized, do _____ cover _____?
 What _____ treatments _____ coverage _____ mine?
 Can _____ switch to _____ if you _____ approve this _____?
 If _____ isn't approved, _____ drugs _____ cover?
 I'm _____ meds _____ covered if I _____ get _____.
 _____ cover an alternative _____ if my medication _____ authorized?
 _____ there a substitute _____ under my plan _____ is _____?
 Is _____ possible to _____ medicine _____ mine _____ rejected?
 _____ be used when _____ approved?
 _____ case of _____ alternate _____ available?
 _____ there a _____ something _____ with non-approved _____?
 What _____ drugs _____ be accepted _____?
 Is _____ covered _____ you _____ offer _____ case mine is _____?
 _____ get _____ medicines if _____ one gets _____?
 _____ my _____ approved, what are the _____?
 Does _____ to my medication request _____ is _____?
 In _____ disapproval, are _____ drugs _____?
 _____ my medicines _____ can I _____ medicines?
 _____ else can _____ take _____ my _____ is _____?
 If _____ doesn't get approved, is _____ for _____?
 _____ alternative drugs would _____ if _____ weren't _____?
 Do _____ for _____ if denied?
 _____ my medication _____ do you _____ other _____ medication?

_____ event _____ any alternate _____ available?
 Do _____ cover _____ when _____ don't _____ authorization?
 _____ alternatives _____ drug request is declined?
 _____ I use _____ my medication _____?
 In _____ am denied _____ offer alternative covered _____?
 Is there _____ alternative covered _____ can offer _____ case _____ denied?
 Are _____ other _____ for drugs _____?
 _____ drugs _____ accepted _____ not _____ approved?
 _____ I don't _____ approval, can _____ a different _____?
 If _____ say _____ to my current _____ get any _____?
 Is _____ any _____ if mine is not _____?
 If there _____ any _____?
 _____ mine's _____ approved, are _____ other _____?
 _____ know if _____ alternative medications _____ covered _____ isn't approved.
 If _____ drugs are available?
 _____ my _____ aren't approved, are _____ covered _____?
 _____ mine _____ other covered pills _____ available?
 Can I _____ a different medication if _____ it?
 Is _____ alternatives if _____ isn't _____?
 Is there _____ medications _____ I do not get _____?
 Will an alternative _____ given _____ insurance _____ prescription is _____?
 If you _____ no _____ you have _____ other medications?
 If _____ is _____ will an _____ drug _____ my insurance?
 Did the _____ for _____ drugs?
 Does insurance _____ when it's declined?
 _____ there _____ other _____ medication _____ not _____?
 _____ is _____ will an alternative drug be _____ insurer?
 If _____ is _____ drugs are provided?
 _____ mine doesn't get approved, will _____ be _____?
 If _____ approved, is _____ other covered medication?
 Does _____ support alternatives to my medication _____ get _____?
 _____ my drug _____ not approved, are _____?
 I don't _____ I _____ get _____ medicines if _____ rejected.
 Is _____ anything _____ I _____ take _____ I don't _____?
 What other _____ if my _____ is _____ covered?
 Can I _____ alternate medicines funding _____?
 If _____ say no _____ my _____ one, _____ get _____ other _____?
 In _____ denied, _____ you offer alternatives?
 Does insurance _____ my _____ if it _____ declined?
 _____ there anything _____ when my _____ aren't authorized?
 Can coverage include _____ for _____?
 If _____ isn't _____ any other _____ available?
 _____ my _____ what are _____ alternatives?
 In _____ of _____ would _____ provided?
 _____ I _____ to access _____ medications?
 Should any _____ drugs _____ in _____ of _____?
 Can _____ different _____ my one is rejected?
 _____ my _____ isn't _____ can _____ use _____ else?
 Does _____ options _____ drugs that are not _____?
 Does _____ substitute drugs _____ is denied approval?

_____ other _____ medications if I _____ get _____?
 Is there another _____ if _____.
 _____ medication _____ authorized, will you cover _____ drug?
 When _____ meds aren't authorized _____ cover _____?
 Is _____ than _____ meds _____?
 _____ drugs free if mine is _____ okay?
 I _____ to know _____ any _____ covered _____ if _____ not approved.
 _____ it possible _____ medicines if I'm _____?
 _____ are accepted if the drug is _____?
 _____ drug _____ approved, what replacement drugs _____?
 Is there _____ sort lacks approval.
 Can _____ medicine _____ my _____ approved?
 _____ coverage include other _____ unapproved _____?
 Does _____ include substitute drugs if _____ prescribed _____ approval?
 If _____ approved, _____ there _____ covered _____?
 _____ my _____ isn't _____ is there _____ for alternative _____?
 _____ my _____ isn't approved, _____ I use _____?
 _____ it _____ for me _____ access different _____ is rejected?
 _____ there coverage for _____ if _____ a denial?
 Is it _____ coverage includes _____ for _____ drugs?
 Does _____ support _____ medication options if _____ request _____?
 _____ any _____ drugs have been provided?
 Is _____ for me _____ other reimbursed _____ my one _____ not _____?
 _____ meds like coverage _____ they _____?
 If _____ approved, are _____ available?
 Is there _____ drugs _____ case of _____?
 If _____ alternative drugs _____ get approved, is _____?
 _____ drug _____ not approved, _____ replacements _____ available?
 _____ I get _____ reimbursed _____ is not approved?
 _____ available _____ my plan _____ one prescribed is rejected?
 _____ meds aren't approved, _____ any _____ you can _____?
 If mine aren't _____ meds?
 Can _____ get other _____ if _____?
 If _____ isn't _____ covered ones would be?
 If mine _____ approved, have _____ meds _____ cover.
 What _____ if they veto _____?
 If my _____ approved, _____ you provide _____?
 _____ doesn't _____ am _____ covered for alternative medications?
 In _____ that _____ is _____ do _____ offer alternative covered _____?
 _____ there alternatives if there _____ my medication?
 Does _____ support _____ medication request if it _____?
 _____ you _____ no _____ my _____ any other meds?
 _____ are _____ if my _____ covered?
 Should _____ other prescriptions if my one _____?
 If _____ meds aren't approved, _____ ones _____?
 Is _____ substituted _____ non-approved med?
 _____ there a _____ medicine, if _____ is _____ approved.
 I _____ if _____ can get _____ funding _____ rejected.
 _____ is denied, _____ you offer _____ medications?
 If _____ is _____ approved, _____ alternatives _____?

If my prescription ____ not ____ alternatives ____ are covered?
 Is ____ a backup ____ cannot get ____?
 ____ there ____ prescriptions ____ I don't get approved?
 ____ would ____ coverage if ____ refuse mine?
 If my meds ____ covered ones are ____?
 Is there any coverage for ____ mine ____?
 ____ isn't ____ what ____ meds are ____?
 ____ may be ____ when not ____.
 If ____ not approved, ____ replacement ____ are available?
 Will ____ an alternative drug ____ medication isn't ____?
 ____ alternatives to my medication ____ if ____ declined?
 Can ____ drugs be ____ approved?
 ____ there ____ in my plan ____ the one ____ denied approval?
 If ____ medication ____ you ____ alternative covered medications?
 ____ medication isn't approved, what ____ your ____?
 If my medication isn't ____ other covered ____?
 If my prescription ____ will I ____ able ____ an ____?
 If my drugs ____ not ____ any ____ available?
 ____ it possible ____ get ____ medicines ____ my medicine ____?
 If mine's ____ alternative ____ medications?
 Is there coverage ____ if there ____ denial?
 If ____ don't ____ this ____ I ____ something else?
 If I'm ____ any ____ meds?
 ____ there substitute ____ plan if the ____ is ____ approval?
 In the ____ is denied, ____ you offer ____ medication?
 What alternative ____ enjoy ____ refuse to give ____?
 ____ my ____ isn't approved, do ____ have ____ backup ____?
 Is ____ any ____ under ____ plan if ____ prescribed ____ not approved?
 If ____ prescribed is not ____ substitute drugs ____?
 Is it ____ to offer alternative ____ medications ____ case ____?
 ____ you ____ covered ____ in case ____ am denied?
 ____ an alternative replacement ____ when my medication ____ not ____?
 ____ are ____ that are covered ____ mine ____ vetoed.
 ____ is ____ can ____ use other medicines?
 If ____ other covered ____ is available?
 ____ not approved, ____ can ____ allowed?
 ____ isn't approved, ____ you give ____ any backup ____?
 If ____ are ____ approved, what ____ are ____ there?
 ____ I ____ myself of ____ prescriptions ____ mine is ____?
 If mine isn't ____ other ____ are ____?
 ____ cover ____ meds if ____ am ____ authorized?
 If my ____ isn't ____ are ____ covered ____?
 ____ the ____ prescribed ____ approval, ____ there any substitute ____?
 ____ for alternative ____ if ____ don't get approved?
 Is there any ____ if ____ am not approved?
 ____ there a ____ medicine, ____ have approval.
 If ____ is denied, ____ you have ____?
 ____ backup meds ____ cover if ____ can't?
 Can ____ gain access ____ alternate ____?
 If you ____ no ____ one, ____ have ____ other meds?

Possibilities exist _____ my _____ ?
 Do you _____ coverage for _____ in _____ event _____ a _____ ?
 There _____ other covered _____ I'm _____ .
 Is there _____ other covered _____ it's _____ approved?
 Is _____ other _____ allowed _____ not approved?
 _____ possible to access other _____ medicine _____ rejected?
 What _____ I able _____ my medication _____ denied?
 Does insurance _____ if _____ refused my _____ ?
 _____ to know if _____ can _____ medicines _____ I _____ rejected.
 _____ to know if _____ can use a _____ .
 _____ it possible _____ other _____ if I'm _____ ?
 _____ approved, _____ there other treatments?
 Can _____ if my _____ isn't approved?
 What else _____ take, _____ medication _____ denied?
 If mine isn't _____ have any _____ cover?
 _____ any backup drugs you cover _____ isn't _____ ?
 _____ my case isn't approved, any _____ are _____ ?
 Is _____ covered drugs I can _____ is denied?
 _____ my _____ approved, any other _____ ones _____ ?
 If _____ what other covered _____ are there?
 _____ it possible _____ have _____ when not _____ ?
 Do you provide _____ substitute _____ if _____ ?
 If _____ is _____ approved, are there any _____ can _____ ?
 Is there _____ medication that's _____ mine is _____ ?
 _____ funded if my treatment is not _____ ?
 Is _____ drugs in _____ plan _____ the _____ is rejected?
 Can _____ use _____ different _____ if my one _____ .
 _____ backup medicine if _____ doesn't have approval?
 _____ a backup medicine, _____ sort _____ get approval.
 If it's _____ what _____ the _____ medications?
 Does _____ plan include any _____ is _____ approval?
 _____ a chance _____ getting alternate _____ funding?
 Is there an _____ that is _____ if _____ is _____ ?
 When _____ medication _____ authorized, _____ cover an alternative _____ ?
 If _____ approved, _____ ones are out there?
 _____ is denied, will an _____ be provided _____ insurance?
 Should _____ covered if _____ is _____ ?
 Is there a _____ medicine _____ have approval?
 _____ you _____ me _____ use my _____ have any _____ meds?
 If my prescriptions _____ can _____ receive other _____ ?
 Other _____ my _____ isn't _____ ?
 _____ isn't approved, _____ there coverage _____ alternative _____ ?
 _____ prescription _____ approved, will an alternative _____ be _____ my _____ ?
 Do _____ offer _____ substitute medicines in _____ event _____ ?
 What _____ if mine is vetoed?
 Does _____ alternatives if _____ request is _____ ?
 _____ approved, any _____ covered ones?
 Options _____ my medication _____ not _____ ?
 Is _____ if I _____ get approved _____ medication?
 _____ funded in _____ my treatment _____ ?

If my _____ is _____ approved, _____ there any _____ ?
 _____ say _____ to my _____ there any other drugs you _____ ?
 If _____ drugs _____ not approved, _____ replacement _____ are _____ ?
 Allowed _____ not _____ is _____ ?
 Is there any alternative _____ are covered _____ I _____ ?
 _____ handled when _____ is _____ ?
 If _____ prescription is denied will _____ alternative _____ be _____ ?
 If my _____ are _____ ones?
 In _____ of disapproval, _____ alternate _____ should _____ ?
 If _____ isn't approved can I use _____ ?
 If _____ denied, will an _____ be _____ my insurance?
 Can _____ use _____ if my medicine _____ ?
 In _____ of _____ denial, _____ you provide coverage for _____ ?
 Can _____ allowed _____ not approved?
 _____ a drug _____ denied _____ are any _____ available?
 Is _____ possible to _____ my isn't approved?
 Is there _____ replacement _____ refused?
 If my drugs _____ what replacement drugs _____ ?
 _____ medicine _____ approved, _____ you have any _____ ?
 _____ alternative drugs are _____ approval?
 Other _____ are _____ when _____ ?
 Is it _____ for _____ use other _____ one is _____ ?
 _____ my medication doesn't _____ is _____ for alternatives?
 _____ doesn't get _____ is there _____ alternative medications?
 If my medication _____ approved, _____ other _____ ?
 _____ of _____ any _____ drugs _____ be offered?
 _____ my medication is not approved, _____ alternative _____ ?
 I don't know if there _____ mine isn't _____ .
 _____ my prescriptions _____ get others?
 _____ cover _____ alternative medication if _____ authorized?
 _____ prescriptions funded _____ one _____ denied?
 _____ medications are denied, do you _____ ?
 What _____ I take _____ my _____ be _____ ?
 _____ my medication doesn't _____ approved, _____ be _____ for _____ medications?
 _____ you _____ any other _____ no to my current _____ ?
 _____ I don't _____ do you _____ meds?
 _____ it possible for _____ to _____ medicines _____ gets rejected?
 _____ coverage _____ alternative _____ if I don't get _____ ?
 Is _____ access different _____ if I _____ rejected?
 _____ there any substitute _____ the _____ of approval?
 If you say _____ my current _____ what other _____ ?
 If my _____ what other options _____ there?
 In _____ medication _____ what else can I _____ ?
 _____ is not approved, any _____ covered ones _____ ?
 _____ possible to cover _____ meds _____ you _____ authorized?
 If _____ approved, what replacements _____ available?
 _____ know _____ cover alternate _____ when mine isn't _____ .
 _____ I be _____ to get other _____ one _____ disapproved?
 Does coverage include _____ drugs _____ are _____ ?
 _____ apply _____ medicines _____ once turned down?

Any replacements _____ my treatment _____?

Should there _____ alternative drugs _____ disapproval?

_____ I'm _____ other _____ drugs are available?

_____ remedies can I _____ if _____ denied?

_____ event that _____ denied, do _____ alternative covered drugs?

Does _____ support _____ to _____ if _____ is rejected?

Is it possible to _____ a _____ if _____ rejected?

_____ my medication _____ will _____ cover an alternative _____?

If the prescribed _____ is _____ substitute drugs _____ my _____?

In case my _____ isn't approved, _____ medication?

Do you cover _____ when _____?

_____ plan include substitute drugs if one _____?

_____ still _____ alternate medicines funding _____?

_____ there other _____ drugs in the _____?

Do _____ any replacements _____ refused?

_____ my _____ is _____ what are other _____?

If _____ are other _____ covered?

_____ coverage _____ other _____ non-approved drugs?

_____ my prescription _____ denied _____ an alternative _____ my insurance?

_____ you _____ current one, could you _____ me any _____ meds?

If my _____ is not _____ what _____ the _____?

If mine _____ get _____ any other covered _____?

When mine _____ you _____ alternate _____?

_____ you cover _____ alternative _____ drug if _____ isn't _____?

_____ medication _____ covered what are _____ options?

_____ aren't approved, _____ can I take?

If my medication _____ is _____ does _____?

Is _____ any covered _____ I _____ get _____?

Can I _____ a _____ if I don't _____?

Other _____ can _____ used _____ not _____?

Is _____ an _____ my _____ refused?

Substitute drugs handled _____ approval?

When _____ are other _____?

If my _____ approved, you _____?

If _____ prescription _____ denied, _____ I be able _____ get _____ under my _____?

_____ that my _____ denied, do you offer _____?

_____ for _____ medications in _____ event that _____ isn't approved?

_____ medications enjoy coverage if _____ mine?

_____ you say _____ current medication, _____ you _____ me any other _____?

_____ if _____ medication isn't approved?

Is _____ possible to take _____ reimbursed prescriptions _____ my _____?

_____ my _____ not _____ are there any _____?

_____ medicine isn't approved, _____ you _____ any _____?

_____ denied, do _____ offer alternative covered medications?

If _____ no _____ my current _____ do _____ other meds?

If my _____ is not _____ the _____?

If my _____ is _____ will _____ drug be _____ insurance?

_____ my _____ is disapproved can _____ other reimbursed _____?

_____ I'm _____ approved, _____ other covered _____ available?

Will _____ cover _____ for me if _____ isn't authorized?

Is it possible _____ different medicines if _____ reject _____?
_____ I be _____ for _____ alternative _____ medication isn't approved?
If my medication isn't _____ a _____ drug?
Is it _____ to _____ if _____ isn't approved?
_____ my medicine _____ can _____ different medicines?
I don't know _____ are covered _____ get approved.
_____ my _____ doesn't get approved, is _____ medications?
Do you have _____ if _____ say no _____ one?
_____ options if my medication _____ get _____?
_____ don't _____ I _____ access other medicines _____ my _____ is _____.
Is there any alternative _____ if my medication _____ not _____?
Suppose my medication _____?
In _____ Alternatives insured?
If _____ don't _____ this drugs, _____ switch to _____?
If _____ my prescribed _____ denied _____ are _____ substitute drugs _____?
If my _____ not _____ alternatives _____?
_____ prescriptions funded after _____?
_____ options _____ if _____ is _____ accepted.
_____ an alternative _____ be provided under insurance _____ is _____?
_____ my medications _____ approved, are there _____?
If _____ any other covered ones?
Is there a _____ if _____ is _____?
_____ any _____ covered _____ if it _____ approved?
_____ if I _____ get alternate _____ funding once _____.
Other prescriptions _____ approved?
Is it _____ use _____ medicine _____ mine is _____?
Is _____ available under insurance _____ prescription _____ denied?
_____ additional _____ funded if _____?
Is it permissible to _____ aren't authorized?
When my _____ you _____ alternate ones?
What alternative drugs could _____?
Can _____ a different medicine _____ approved?
Can _____ something else _____ don't _____ this meds?
_____ possible to get _____ alternative medications if _____ don't _____?
If my medication _____ are other _____ medications?
I _____ I _____ use a different medicine if _____.
I would _____ to _____ alternate meds _____ my are _____ authorized.
_____ another _____ if _____ medication isn't paid _____?
Do you _____ coverage for _____ medicines _____ you _____?
_____ of disapproval, _____ drugs provided?
_____ there _____ for _____ prescriptions if _____ isn't _____?
_____ mine's _____ there _____ other covered _____.
If my _____ are _____ can _____ ones?
Is _____ any coverage if _____?
_____ receive _____ medicines funding?
_____ drugs are _____ do _____ alternatives?
_____ that are allowed _____ not approved?
_____ there _____ covered medications _____ mine is _____?
_____ my _____ aren't _____ any replacements _____ found?
_____ there any replacement drugs out _____ isn't _____?

_____ be covered for a _____ drug if my _____ ?
 _____ other options for _____ drugs?
 _____ it _____ to _____ alternate medicines funding _____ rejected?
 What _____ can _____ my _____ is denied?
 Is there _____ alternative drug _____ you will _____ if _____ ?
 Do _____ offer alternative _____ in _____ I _____ denied?
 Will there _____ a _____ don't get approval?
 _____ case _____ medication _____ denied, do you _____ alternative _____ ?
 Is there _____ after denial _____ approval?
 _____ it possible _____ a different medicine _____ mine _____ not _____ ?
 Can _____ other prescriptions _____ my _____ is _____ ?
 _____ my meds _____ do you _____ alternate _____ ?
 Does _____ support _____ to _____ if _____ don't get _____ ?
 What are alternative _____ enjoy _____ they _____ mine?
 _____ is _____ I use another medicine?
 Is _____ possible _____ cover _____ medications when mine _____ ?
 _____ drugs be _____ when not _____ ?
 Should insurance _____ alternatives to _____ request _____ is _____ ?
 _____ mine _____ okay, _____ other _____ ?
 _____ something else if _____ medication _____ approved?
 If my _____ approved, _____ I use _____ one.
 _____ that are covered if my medication _____ ?
 If _____ is denied _____ any substitute _____ available?
 _____ I get _____ alternative drug if _____ authorized?
 Is there any _____ thing _____ take _____ medication _____ denied?
 _____ to _____ you _____ alternate meds when I _____ authorized.
 Is there _____ I don't _____ for the _____ ?
 If _____ approved, _____ covered options?
 _____ meds allowed _____ approved?
 When my prescription isn't _____ alternate _____ ?
 Is _____ any alternative covered _____ in case I _____ ?
 _____ an alternative replacement drug _____ my medication _____ ?
 If _____ medicine is _____ I _____ different _____ ?
 _____ I be _____ to _____ drug _____ my prescription _____ denied?
 _____ you cover _____ drug if _____ medication _____ authorized.
 Can I get another _____ my _____ rejected?
 Is _____ a backup _____ my _____ is _____ approved?
 _____ for a non-approved med?
 Will you cover _____ drug if my _____ ?
 _____ I avail myself _____ reimbursed prescriptions if _____ one _____ ?
 Should _____ replacement drug if my _____ isn't _____ ?
 _____ possible _____ get _____ medicine funding once _____ ?
 _____ my medicine _____ can _____ another?
 In case _____ could any _____ drugs _____ ?
 _____ could _____ handled _____ denial of _____ ?
 If my _____ are disapproved, _____ I _____ to _____ other _____ ?
 _____ not _____ can other drugs _____ ?
 If _____ aren't approved, _____ be _____ replacements?
 _____ I be _____ to _____ different medicines _____ rejected?
 _____ wondered _____ I could _____ alternate _____ funding once _____.

Is _____ any alternative _____ is _____ if my approval _____?

If _____ coverage isn't _____ any other _____ drugs _____?

Is there _____ if my sort _____ approval?

_____ is denied, _____ you _____ other covered _____?

_____ are _____ am I able _____ other prescriptions?

_____ there _____ for _____ alternative medications _____ I _____ get _____?

_____ are other drugs that _____ covered _____ mine _____.

Other _____ is not covered?

Does _____ include other options _____ drugs _____ approved _____?

_____ there _____ alternative _____ not approved?

_____ provided in case _____ disapproval?

Is _____ covered _____ it is vetoed?

Is _____ drugs _____ are _____ if _____ get approval?

_____ I switch to _____ won't approve it?

If _____ one prescribed _____ approval _____ substitute drugs available?

If _____ refuse _____ other _____ coverage?

_____ way to use a _____ if _____ medicine _____ approved?

_____ my _____ is disapproved, can _____ still _____ prescriptions?

_____ for _____ to access _____ medicines _____ mine gets rejected?

_____ doesn't get _____ there be _____ for alternative _____?

Will you _____ alternative drug if my _____?

Is there _____ medications _____ are covered if _____ am _____?

_____ possible for _____ prescriptions if my one _____ disapproved.

_____ case of _____ alternate drugs _____?

If _____ isn't approved, _____ any backup pills _____?

If my _____ isn't approved _____ alternative _____ provided?

_____ my _____ approved, any replacements _____?

I want to _____ you _____ alternate meds _____ mine _____.

_____ other _____ be _____ when not _____?

If _____ no to _____ medication, do _____ have _____ others?

If _____ aren't _____ what _____ can _____ use?

Is there _____ other covered _____ if _____?

_____ alternative _____ covered by _____ if _____ prescription is denied?

Is it _____ another _____ if my _____ approved?

Will _____ for _____ alternative drug if _____ isn't _____?

Is there coverage _____ alternative _____ case _____ not _____?

If mine is _____ are _____ that are covered?

_____ my medication isn't _____ other covered ones?

_____ I can get _____ funding once turned down.

_____ you _____ alternative covered medications _____ is _____?

If _____ isn't approved, _____ use _____ drug?

_____ possible _____ take _____ prescriptions if _____ is disapproved?

If I'm _____ covered medications?

Do _____ have _____ other pills _____ you say no _____?

_____ denied, _____ you offer alternative covered drugs?

Can _____ alternate medicine funding _____?

What can I _____ I _____ my _____?

Is it possible _____ other _____ if my one _____?

Is _____ way _____ get alternate medicines _____ once _____?

Is there _____ my _____ isn't _____?

_____ that _____ not _____ coverage include other options?
 _____ my _____ are _____ any other meds?
 _____ if they refuse to cover me?
 _____ the coverage _____ other _____ non-FDA _____ drugs?
 Is _____ a substitute _____ non-approved meds?
 _____ meds aren't approved, _____ you cover _____?
 _____ my _____ not covered, _____ options are there?
 _____ medication is rejected, _____ access _____ medicines?
 Does coverage include _____ drugs _____ weren't _____?
 Is there _____ drug available if mine _____?
 If _____ other medications are covered?
 _____ any other _____ not approved?
 _____ it possible _____ are funded when _____?
 Other options _____ if _____ not covered.
 Is there any _____ meds _____ are available _____ get _____?
 _____ case my _____ covered, _____ you _____ alternatives?
 Is _____ backup medicine _____ my sort _____ get _____.
 Will _____ other _____ if my _____ is not _____?
 _____ case _____ is _____ do you _____ alternatives?
 _____ it permissible to _____ not approved?
 _____ it _____ to _____ medicines funding once they _____?
 _____ refused, _____ there be _____ replacements?
 _____ my drug _____ accepted.
 _____ I switch to _____ approve the medication?
 If my _____ denied _____ an alternative _____ be _____?
 Is _____ if _____ not accepted?
 _____ I use _____ medicine _____ my _____ is rejected?
 _____ a backup medicine _____ I don't get _____?
 Are _____ my medication isn't _____
 If my medication _____ will you _____ alternative _____?
 _____ any _____ drugs available if my approval _____?
 If _____ meds _____ approved, _____ other covered ones _____?
 _____ there alternatives _____ my _____ if it _____?
 _____ there a _____ to _____ an alternative drug _____ denied?
 _____ one's denied, _____ extra _____?
 _____ it _____ medicines if I get rejected?
 Other meds allowed _____?
 _____ it possible _____ me to _____ medicines if my _____?
 _____ prescribed is _____ approval, _____ any substitute _____ available?
 _____ I get _____ if it's _____?
 If disapproval _____ any alternate _____?
 If my medicine _____ rejected, can _____?
 _____ treatment is denied, _____ replacements _____?
 _____ cover an alternative replacementdrug _____ my _____ isn't _____?
 _____ my _____ is _____ will any substitutes _____?
 _____ substitute _____ could use if _____ med refused?
 Does _____ support _____ if my _____ Declined?
 Is there _____ unapproved _____?
 _____ for me _____ reimbursed prescriptions if mine is not _____?
 _____ can't get _____ meds approved, do _____ have _____?

I _____ I can use a different _____ approved.
 If my _____ isn't approved, _____ there?
 _____ is _____ what _____ are covered?
 Is it possible _____ me to _____ other _____ mine _____?
 Is _____ a _____ be funded _____ case _____ treatment is _____?
 _____ any _____ if _____ not approved?
 _____ another _____ if my is _____ approved?
 _____ my _____ rejected, _____ alternative drug be provided _____ my _____?
 _____ there _____ alternative _____ be _____ if mine is denied?
 Is _____ denial of approval?
 If my _____ isn't _____ is _____ coverage _____ prescriptions?
 Is there _____ unapproved _____?
 _____ support _____ if my medication _____ declined?
 If _____ rejected, what _____ are covered?
 _____ my prescriptions _____ disapproved, _____ still _____ other prescriptions?
 If my medication _____ will you _____ an _____?
 _____ any substitute if my _____ allow _____?
 Was _____ any substitute meds handled _____ approval?
 _____ there a backup _____ there _____?
 If _____ you have coverage for _____ medications?
 Was it possible _____ get _____ funding?
 If _____ prescribed is _____ approval, _____ be substitute drugs _____?
 _____ insurance _____ support _____ medication _____ if it is _____?
 _____ doesn't get approved, _____ there other covered _____?
 I _____ know _____ cover alternate _____ when _____ aren't authorized.
 _____ my medicine doesn't get _____ can I _____?
 If my prescription _____ disapproved, _____ myself of _____.
 If my medication _____ is there _____ other _____?
 If my _____ medications _____ get _____ there coverage _____?
 Is it _____ for me to get _____?
 _____ there coverage _____ my _____ don't get approved?
 _____ my medications are _____ alternative covered medications?
 _____ my _____ not _____ are any alternatives _____?
 _____ insurance _____ alternatives if my _____ is _____?
 Other drugs could _____ when _____.
 Is there any _____ that are _____ I _____ get _____?
 If my _____ approved, is there coverage _____?
 What prescriptions _____ if _____ mine?
 _____ there _____ other drugs _____ of disapproval?
 Should any alternate _____ be _____ case _____?
 Is _____ any alternative medications _____ are _____ if _____ not _____?
 Should substitute _____ be _____ my _____ the _____ is denied approval?
 Can I get _____ my _____ denied?
 Is there _____ medicine, _____ my _____ approval.
 There _____ options if my _____.
 _____ coverage for alternatives _____ is not approved?
 If _____ approved, what _____ medications _____ there?
 If _____ is there _____ substitute funded?
 What _____ coverage _____ refuse mine?
 On _____ approval, _____ drugs handled?

____ my medication is not ____ are ____ any ____ ?
 What ____ drugs is ____ if ____ ?
 ____ isn't approved, are ____ other prescriptions ____ take?
 If my prescription ____ an alternative drug be ____ ?
 ____ medicine ____ rejected, can ____ get other ____ ?
 ____ alternative medications ____ they ____ me?
 ____ my ____ approved, can there be ____ alternatives?
 Is it ____ to ____ funding ____ rejected?
 ____ would like ____ are covered if I don't get ____ .
 If you ____ this ____ switch to ____ medication?
 ____ substitute funded ____ my treatment ____ ?
 Is ____ coverage ____ if you ____ denied?
 Can ____ switch to something ____ you ____ medication?
 ____ can ____ allowed ____ not approved?
 ____ would ____ know ____ cover alternate meds ____ I am not ____ .
 Can a different medicine be used ____ ?
 If mine ____ not ____ covered ____ are available?
 Will you cover ____ drug if ____ is ____ ?
 ____ other options ____ drugs that were ____ approved?
 If ____ denied ____ an alternative drug ____ covered?
 If my ____ vetoed, ____ drugs would ____ ?
 ____ is not approved, will ____ an alternative?
 The other ____ be allowed ____ ?
 ____ case ____ should ____ be any ____ drugs?
 ____ coverage ____ drugs ____ get approved?
 If my medicine ____ I ____ another ____ ?
 ____ Drugs ____ they refuse mine?
 ____ is ____ is there any substitute ____ available?
 ____ I can ____ if my med's refused?
 ____ options should ____ medication ____ covered?
 ____ alternative covered medications that ____ offer in ____ denied?
 Is ____ to provide ____ covered ____ in ____ is denied?
 ____ my ____ are ____ can ____ give me any ____ ?
 Is there ____ backup medicine, ____ isn't ____ ?
 ____ my ____ isn't ____ any backups?
 Does ____ support alternatives if ____ medication ____ declined?
 Do ____ to covered drugs if ____ denied?
 ____ covered if my ____ is ____ ?
 If I ____ get approved, are ____ any ____ ?
 ____ say ____ my current one, can ____ give me any ____ ?
 ____ I ____ if you ____ approve this medication?
 Will ____ cover an alternative drug ____ medication ____ ?
 Is ____ okay ____ to cover alternate meds ____ authorized?
 ____ my meds don't ____ you have any ____ ?
 If my ____ are there ____ ?
 ____ there coverage if ____ don't ____ approved ____ medications?
 ____ want to know ____ other meds ____ mine isn't ____ .
 What ____ drugs will be ____ am ____ ?
 ____ approved, ____ there coverage for alternative prescriptions?
 ____ are ____ meds allowed ____ not ____ ?

_____ to know if you _____ alternate meds _____ aren't _____.

Options _____ if _____ medication _____?

Is _____ any _____ covered medication I _____ take if _____ approval _____?

_____ I _____ other drugs are _____?

_____ case my _____ is _____ do _____ have _____ medications?

_____ don't know _____ can _____ different _____ mine is rejected.

_____ I use _____ if it isn't _____.

Is _____ any other medication _____ if _____ not approved?

_____ one prescribed is _____ approval, _____ drugs in my plan?

_____ drugs are accepted _____ don't _____ it?

_____ don't know _____ other _____ are _____ don't get approval.

_____ you say _____ to my current _____ can you _____?

Do you have _____ alternate drugs _____ be _____ disapproval?

Is _____ to _____ different _____ if mine _____ rejected?

Is _____ any _____ covered _____ available if _____ approval _____?

If _____ don't get approved, _____ are _____?

_____ medicine would _____ coverage if they _____?

_____ disapproval, _____ alternate drugs?

If _____ no _____ one, _____ any other prescriptions?

_____ any _____ drugs available _____ it isn't _____?

_____ it _____ use _____ medicine if it is _____ approved?

If _____ say _____ to _____ meds, _____ any other?

_____ drug isn't approved, _____ a different one?

If my drugs _____ approved, are _____?

Is _____ possible _____ can _____ different medicines if _____ rejected?

Do you _____ a _____ occurs?

_____ you give _____ for _____ following a _____?

If my _____ are _____ do _____ have _____ backup?

_____ there _____ medications _____ can be used _____ mine is _____?

_____ if the medication _____ approved?

Does _____ alternatives _____ my _____ if it's declined?

_____ given under my insurance if _____ prescription _____ denied?

Can I _____ medication _____ you won't _____ it?

On denial _____ substitute meds _____ handled?

Is an alternative _____ drug _____ medication _____ authorized.

_____ I _____ vetoed, what _____ covered?

_____ you can cover when _____ meds _____ authorized?

_____ event that mine _____ denied, do _____ alternative _____ medications?

_____ available if _____ isn't approved.

_____ the coverage _____ other _____ for _____ that aren't _____?

_____ there any _____ medication _____?

Other meds can _____ after _____?

Other options _____ is _____?

_____ there other meds _____ can be _____ approved?

_____ if I _____ get _____ for an alternative?

_____ it possible for me to _____ mine _____ rejected?

_____ any substitute meds _____ on _____ approval?

If _____ approved, _____ I use _____.

_____ there a chance of _____ medicines funding _____?

If my medication _____ other covered _____?

____ it ____ cover alternate ____ when ____ aren't authorized?
 Can ____ get other ____ if I ____?
 ____ to ____ meds when mine aren't approved?
 Is ____ insurance ____ alternative ____ if ____ prescription is denied?
 ____ there ____ I don't get approved ____ prescriptions?
 If my ____ be ____ substitute?
 If ____ drug ____ denied approval, ____ any ____ drugs ____?
 Is it possible ____ different ____ mine gets ____?
 ____ it's not approved, are ____ any ____?
 ____ I ____ to something ____ if ____ refuse to approve ____?
 ____ coverage ____ substitute medicines if there's ____ denial?
 ____ is denied ____ are any ____ drugs available?
 In the ____ any ____ drugs would ____ provided?
 Is ____ possible ____ get different medicines ____ medication ____?
 If ____ medication is ____ will ____ a different ____?
 Is ____ any ____ that is covered if ____ approved?
 ____ in case ____ disapproval?
 Other ____ can be ____ not ____?
 Can ____ get alternate ____ it's ____?
 ____ my prescription ____ denied, will ____ alternative ____ to use?
 ____ substitute ____ have ____ the event of a ____?
 If ____ my ____ meds like?
 ____ funded when ____ denied?
 ____ there any ____ medication if I ____?
 ____ my ____ approved, are there any ____ that ____ covered.
 If ____ you ____ alternative medication?
 ____ prescribed ____ approval, what replacement drugs are ____?
 Is ____ any ____ will be ____ mine isn't approved?
 In ____ disapproval, ____ alternate drugs would ____?
 ____ drugs ____ be taken ____ not ____?
 Do you ____ for ____ medicines ____ denial?
 ____ use a ____ my ____ is not approved?
 ____ there ____ substitute drug ____ can ____ if the one ____ is ____?
 ____ there ____ else I ____ my ____ is denied?
 ____ case mine is ____ do ____ offer ____ drugs?
 ____ my medications aren't ____ there ____?
 Can ____ use ____ medicine if ____ don't ____ approved?
 Other alternatives if ____ not ____?
 Is ____ covered medication ____ I'm ____?
 ____ my ____ isn't ____ what other ____?
 ____ you ____ coverage ____ substitution ____ in the ____ of a ____?
 If ____ drugs are there?
 If I'm not ____ what ____ are out ____?
 If mine ____ get ____ is there coverage ____?
 ____ want to ____ if ____ can ____ if ____ is disapproved.
 ____ are ____ it is vetoed?
 ____ you have any ____ pills ____ I ____ no to ____?
 ____ my prescription ____ denied, will ____ drug be ____ under ____?
 ____ I ____ medicines funding ____ it ____ rejected?
 ____ my ____ is ____ will ____ cover an ____ drug?

If _____ an alternative drug be provided?
 If _____ prescription is _____ an _____ in my insurance?
 _____ it _____ that _____ includes _____ options _____ unapproved drugs?
 _____ it's _____ are there _____ drugs?
 Is _____ backup medicine _____ I _____ get _____?
 Which _____ meds enjoy _____ mine?
 _____ of disapproval, _____ alternate _____ given?
 There are other options _____ available.
 Is it _____ to get _____ under _____ one _____ is rejected?
 _____ options if _____ medication is _____?
 If _____ drugs _____ not _____ what replacements _____?
 _____ backups for unapproved _____?
 Is it _____ for me _____ access other _____ if _____?
 What _____ my _____ is denied?
 _____ my _____ meds aren't approved, _____?
 _____ my _____ approved, _____ replacement drugs are _____?
 _____ isn't _____ are _____ other pills?
 Is _____ possible _____ different _____ my one _____ not approved?
 If I _____ meds _____ what _____ you cover?
 _____ authorized, _____ you cover _____ meds?
 Do you _____ when _____ don't _____ authorization?
 _____ alternative covered medications _____ offer if _____ denied?
 Is _____ you to _____ alternate meds _____ aren't authorized?
 Is _____ for me _____ medicines if _____ am rejected?
 If _____ med _____ you _____ any backup meds?
 Can _____ else if you _____ to _____ the meds?
 If my _____ not accepted, _____ are the _____?
 Options exist _____ medication _____ be _____?
 _____ my prescription is _____ take _____ prescriptions?
 _____ are other _____ is not approved.
 _____ the prescribed drug _____ approval, _____ any _____ available?
 Can you _____ for an alternative _____ medication is _____?
 There _____ other _____ are _____ when not _____.
 If _____ meds aren't approved, _____ covering _____?
 _____ is not _____ you have any _____ meds?
 _____ one _____ what alternative drugs are available?
 In case _____ isn't approved, _____ coverage _____ medications?
 I don't know if _____ can _____ medicine if my _____.
 _____ isn't authorized, will _____ cover the _____?
 What other _____ are _____ vetoed?
 If _____ meds aren't approved, _____ there other _____?
 _____ know _____ any alternative _____ covered _____ mine _____ not approved.
 _____ there _____ drug denied approval, are _____ drugs _____?
 _____ my medication isn't _____ cover alternate _____?
 If mine _____ are _____ any _____?
 _____ case _____ treatment is denied?
 Is my _____ I _____ get approval?
 Is _____ drugs _____ if _____?
 _____ it possible for me to _____ different _____ if _____?
 _____ be _____ in case of disapproval?

_____ include other _____ for _____ drugs?

_____ coverage for alternatives in _____ I don't _____?

If you say _____ to _____ current one, _____ you _____ other _____?

_____ of disapproval, _____ alternate drugs that can _____?

Is there other options if _____.

_____ my _____ any _____ covered ones?

_____ the _____ is _____ are any substitute _____ available under _____ plan?

If the _____ prescribed is _____ approval, _____ alternative _____ under my _____?

_____ medication isn't _____ any _____ ones are out _____?

_____ my _____ isn't approved, _____ available?

_____ it possible _____ reimbursed prescriptions if _____ disapproved?

Do I _____ chance _____ get _____ medicines _____?

If _____ prescribed _____ there _____ substitute drugs available?

Will you pay _____ an alternative _____ medication _____ authorized?

If my _____ approved, are _____?

_____ don't get _____ is _____ else _____ can take?

Is there a backup _____ my _____ doesn't _____.

In case _____ any _____ drugs?

Is _____ any _____ medication that _____ I don't _____ approved?

If my prescription is denied _____ an _____ under _____?

Is it _____ that you cover _____ are not _____?

_____ drugs _____ when the approval _____?

Is there any _____ that _____ covered _____ not approved?

_____ get approved, is _____ coverage _____ alternative pills?

Do _____ medication isn't accepted?

If _____ medication _____ are there any other _____?

If _____ don't _____ approved there _____ medications.

_____ any _____ drugs _____ aren't approved?

Is _____ any other medication _____?

If you _____ no _____ my current _____ any else?

_____ my medicine _____ approved, _____ ones?

_____ substitute drugs _____ my plan if one is _____?

_____ there _____ coverage for _____ medications if mine _____?

_____ there _____ alternate meds _____ mine aren't authorized?

_____ is not _____ what are the _____?

Other options _____ I _____ get _____?

Do you _____ coverage _____ case of denial?

If _____ approved, _____ drugs are out there?

_____ can _____ take if _____ is _____ given?

_____ things can I _____ medication _____ denied?

Allowing _____ when not _____?

_____ want to know _____ you _____ alternate _____ my _____ authorized.

If you say _____ to my _____ would _____ medication?

What _____ enjoy _____ if they _____?

Will _____ be _____ insurance if _____ prescription is denied?

_____ there any option _____ my _____ accepted?

Is _____ coverage for _____ the event _____ denial?

I _____ cover alternate meds when _____ am not _____.

Are _____ alternatives _____ isn't _____?

Is there any _____ medication _____ if _____ isn't _____?

____ my ____ aren't ____ any ____ covered ones ____ are?
 In case ____ disapproval, ____ any ____ provided?
 Are ____ other ____ if ____ is ____ covered?
 ____ you say ____ to my ____ will ____ have ____ drugs?
 What ____ coverage ____ refuse my coverage?
 Do you ____ substitute ____ get a ____?
 What ____ remedies can ____ my medication is ____?
 If my ____ is ____ will an ____ my insurance?
 ____ I aren't ____ other ____ meds ____ available?
 ____ get alternate ____ once ____ down?
 Is ____ to ____ alternate medicines ____ once ____ down?
 ____ aren't approved, what replacement drugs will ____?
 ____ one ____ isn't approved, are ____ substitute drugs ____?
 Is there any ____ medications ____ approval?
 If ____ get approved, ____ there coverage ____ alternate ____?
 ____ I ____ medicines if ____ get ____?
 ____ approve ____ med, can I ____ to ____ else?
 If ____ medication is ____ you cover another ____?
 Are alternatives ____ if ____ not ____?
 ____ medication ____ do you have any backup?
 ____ my ____ is ____ are my options?
 When mine aren't authorized, ____ you ____?
 Is there ____ coverage ____ medication ____?
 Is ____ alternative if my ____ doesn't ____?
 In ____ my ____ any ____?
 Is ____ by alternatives if it ____?
 Is there any ____ funded ____ is denied?
 ____ alternate ____ that could ____ in case of ____?
 ____ substitute if ____ refused?
 Are there ____ if ____ isn't approval ____?
 Does ____ alternatives if my ____ for medication ____?
 ____ mine isn't approved, ____ replacement ____ will ____?
 ____ alternative medication ____ coverage if ____?
 ____ to know if other ____ are ____ if ____ get ____.
 If ____ approved, ____ drugs are ____?
 In ____ my ____ is ____ there coverage for ____?
 ____ my medication ____ approved, ____ alternatives?
 If ____ to me, ____ you have ____ other ____?
 There ____ covered ____ if mine ____.
 When ____ drugs aren't ____ do ____ alternate ____?
 ____ my ____ is ____ I get another ____?
 If ____ prescriptions are disapproved, ____ I ____ reimbursed ____?
 If ____ isn't approved, what ____?
 ____ isn't approved, ____ are ____ other covered ____?
 Is ____ a ____ medicine if my sort ____?
 Other medication ____ when ____?
 Is ____ possible for ____ insurance to ____ my ____ request?
 Is ____ any ____ if it's ____ approved?
 ____ you ____ an ____ replacement drug if my medication ____?
 If ____ meds ____ there others?

If my _____ do any alternatives _____?
 If _____ to my current _____ do you _____ any _____?
 _____ my _____ approved, _____ are the _____?
 Any _____ my med's _____?
 If my _____ approved, can _____ something _____.
 When mine _____ do _____ cover _____?
 _____ prescriptions _____ coverage _____ refuse mine?
 _____ the _____ prescribed _____ denied approval, _____ drugs available for _____ plan?
 If my _____ aren't _____ you _____ me any _____?
 _____ drugs _____ case of disapproval?
 _____ meds can _____ if not _____.
 Is _____ other _____ allowed when _____?
 If _____ medication isn't approved, _____ are _____?
 _____ authorized, do you _____ alternate _____?
 If my _____ other options _____ there?
 Will you _____ drug if I don't _____ medication?
 _____ any _____ funded in _____ event _____ treatment _____ denied?
 _____ there any _____ funded _____ the event _____ is _____?
 Should my _____ what options _____?
 other _____ medication _____ covered
 If my meds _____ approved, _____ other _____?
 If my drug is _____ there _____ other _____?
 Is there a Plan B _____ not approval _____?
 If my _____ is rejected, _____ access _____?
 Are there alternatives _____ isn't _____?
 _____ coverage for _____ drugs if mine is _____?
 If _____ not _____ are out there?
 _____ denied, _____ prescription funded?
 _____ case _____ medication doesn't get _____ is there _____ for _____?
 Will you _____ alternative replacement _____ my medication isn't _____?
 _____ medication is _____ other covered _____ are available?
 If my _____ doesn't get _____ can _____ another _____?
 _____ case my _____ is denied, do _____ alternative _____?
 Is there _____ covered _____ can _____ if I'm _____ approved?
 _____ covered _____ the medication _____ not approved?
 Do I _____ if _____ is _____ accepted?
 Will you _____ an _____ my _____ is _____ authorized?
 Is _____ possible _____ me _____ get other _____ I am _____?
 _____ there any _____ covered _____ available _____ isn't approved?
 _____ my medication is _____ accepted, _____?
 Can _____ be used if my prescription _____?
 _____ you _____ no _____ one, do _____ any other medication?
 _____ take if not approved?
 Is _____ possible _____ access _____ medicines if _____ turned _____?
 _____ my _____ is _____ approved, are _____ any _____ alternatives _____ are _____?
 If my _____ are there other _____ for _____?
 _____ say no _____ my current _____ are there any _____ meds _____?
 _____ isn't _____ there _____ other covered _____.
 Is _____ other covered _____ that _____ be _____ if mine _____?
 _____ case my _____ is denied?

_____ there _____ if my _____ not _____?

_____ possible that you _____ alternate meds _____ authorized?

_____ there any _____ it isn't approved?

_____ my prescription _____ denied will there be _____?

_____ prescriptions are not approved, _____ get other _____?

_____ my _____ approved, _____ there coverage for alternative _____?

If my _____ there _____ replacements?

_____ my _____ isn't approved, do _____ any _____ meds?

Is _____ possible _____ to _____ other prescriptions _____ mine _____ disapproved.

_____ rejected, _____ I access _____ drugs?

Are _____ alternatives if _____ don't get _____ for _____?

Any _____ my medicine _____?

Is there a backup _____ I _____.

Is it _____ get different _____ my _____ is _____?

_____ wonder _____ can take _____ medication is denied.

If _____ medication isn't _____ are _____ backups?

If _____ medicines get _____ I _____ ones?

Is _____ okay to _____ meds _____ I _____ authorized?

_____ my _____ is _____ authorized, will you cover _____?

I _____ to know _____ substitute _____ if the one prescribed is _____.

_____ dealt _____ on denial _____ approval?

_____ are there any _____ meds?