

What are Prior Auths?

A Medication Prior Authorization is required by your insurance company to determine if they will pay for your medication.

Most insurance companies require prior authorizations for most pain medications even if you have been on the medication for years!



Insurance companies can spend up to three business days reviewing whether the medication meets their guidelines and whether they will pay for the medication **AFTER** your medical provider has prescribed the medication for you!

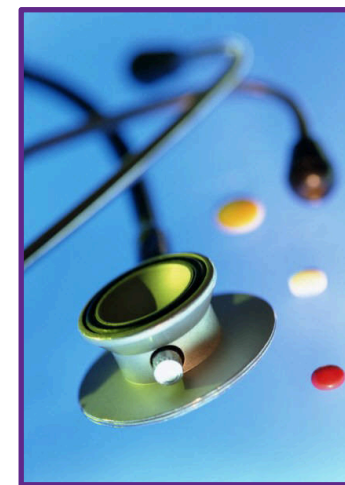
Medication prior authorizations are required by most insurance companies for most pain medications. We recognize our patients need the medications our providers prescribe and, although we have no control over your insurance company's prior authorization policies, we have a **Prior Authorization Specialist** who solely focuses on getting your insurance company to authorize the medications we prescribe. Always feel free to call your insurance company with questions.



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Medication Prior Authorizations



Guidelines for success

Pain management is a *process*.
**Your treatment is tailored
to your special needs.**

Medication prior authorization is the process through which your prescription insurance company reviews your medical history to determine if they will pay your prescription.

**ADVANCED DIAGNOSTIC
PAIN TREATMENT CENTERS**

Prior Auth Process

- Your provider sends your prescription electronically to your pharmacy. **(If you have been given a paper prescription, take your prescription to the pharmacy.)**
- The pharmacy tries to fill your prescription and checks your prescription insurance benefit coverage and discovers that your insurance plan requires a prior authorization for your medication before your insurance will pay for it. The pharmacy will tell you they cannot fill your prescription and a prior auth is needed. **(If you have been given a paper prescription, leave the prescription at your pharmacy or take it to a pharmacy closer to home and leave the prescription there.)**
- Then the pharmacy faxes a prior authorization request to our office to notify us of the issue.
- Once our office receives the fax from your pharmacy, we submit it our Prior Authorization Specialist for processing.
- Our Prior Authorization Specialist uploads the request to your chart so we know they are working on the request and reaches out to your insurance company, sending any required paperwork the insurance company needs to prove you really do need your medication.
- Once your medication is authorized, your insurance company will let your pharmacy know and your pharmacy will contact you when the script is ready. If you are unsure, call your pharmacy and ask them if they can fill the prescription.

- Your medical assistant is your point of contact and can relay information between you and our Prior Authorization Specialist as needed.
- If you have **workman's compensation prescription coverage**, please note that **your pharmacy has to contact your adjuster directly for your prior authorization**. We will give your pharmacy your adjuster's information if they ask us for a prior auth. **Call your adjuster or attorney if you have issues.**

Possible Issues

- **My prior auth was denied! How do I get my medications?**
When a prior authorization is denied, we automatically start an appeal with your insurance company. You can wait for the appeal to be processed or call for an appointment for a substitute medication. You can also call your insurance company and ask what other medications they will pay for and let us know.
- **My pharmacist/ insurance says I can only have a 7-day supply! What do I do?**
New rules requiring 7-day limits do not apply to patients already on chronic medication programs. If you are currently on a 30-day medication program, tell them as a chronic patient that the 7-day rule does not apply to you **and DO NOT accept the 7-day script**. Accepting a 7-day script in error greatly delays your prior auth process! Call the office if you need help.

- **How do I make sure the doctor's office received the prior auth request?**
Call us and ask if we've received it—it goes in your chart as soon as the Prior Authorization Specialist receives the faxed request.
- **I need my medications urgently! What do I do?**
Call us if you need medications within 24 hours and we can have your prior auth marked urgent when processed. Then, call your insurance company as well and discuss the issue with them. They will process the paperwork we send them more quickly if they hear from you that it is urgent.
- **How often is prior authorization required?**
Most plans will authorize a medication for 6 or 12 months at a time.
- **How long does the prior auth take?**
We submit the prior authorization request within 24 hours of receiving the request from your pharmacy.

Tips

- Make sure your pharmacy and your doctor's office have updated and accurate prescription insurance information.
- If you are expecting to need a prior authorization, ask your provider during the office visit for an early fill date.
- Plan ahead by asking your insurance if you will need a prior auth—know and be prepared!