

Pharmacy FAQ

What is a “prior authorization” (PA) and how do I get one?

A prior authorization is for prescriptions that must be approved by Absolute Total Care’s pharmacy benefit manager – Envolve Pharmacy Solutions or by the Absolute Total Care Pharmacy Department for specialty drugs. Envolve Pharmacy Solutions is responsible for reviewing prior authorizations for all prescribed drugs that are filled at retail pharmacies. The Absolute Total Care Pharmacy Department is responsible for reviewing PAs for specialty drugs.

Why do my prescriptions need a PA and do I need to get one every time?

Your medication(s) may need a PA if they are not on the Preferred Drug List (PDL) or do not follow the PDL guidelines. A PA is only needed when your provider prescribes a medication that is not on the PDL, does not follow PDL guidelines or when the existing PA has expired.

Will my prescription be covered if they are not on the PDL?

Any medications that are not on the PDL will require a PA.

If approved: If the medication is approved, it will be covered by the plan for a certain time period. All medications are not approved for the same time period. The maximum time period is one year. When your PA has expired, your provider will need to submit a new request.

If denied: If a medication was denied after the first review, talk to your provider about the denial. If you and your provider do not agree with the decision that was made, you may submit an appeal to Absolute Total Care for further review.

I received a prescription from the emergency room, how can a PA be requested?

If the medication is not on the PDL, you may receive a 5-day emergency supply of the medication. During this time, you must visit your provider who will continue your care with the medication that was provided by submitting a PA request for the non-PDL medication. If your provider does not agree with the prescribed medication, your provider may refer to our PDL for other medications that are covered by Absolute Total Care.

Why has my PA request denied?

A PA request can be denied for several reasons such as: failure to try two or more PDL agents, the maximum therapy period has been met or step therapy is required.

How can I get my medication(s) after it's been denied?

You will receive a denial letter in the mail if a medication has been denied. Talk to your provider about the denial. If you and your provider do not agree with the decision that was made, you may submit an appeal to Absolute Total Care for further review.

What other medications can I take since my medication was denied?

Always talk to your provider about PA denials. Other medications are suggested on the PA denial letter, however, they should be discussed with your provider.

Why do I have pharmacy copays?

All health plans are allowed to charge pharmacy copays similar to how fee-for-service or regular Medicaid does.

What happens if I cannot afford the copay?

Copays are not waived for the inability to pay. The plan offers a CentAccount® rewards program that can assist with any medical copays that may occur along with over-the-counter (OTC) medications.

Why am I being charged more than a \$3.40 copay at the pharmacy?

Absolute Total Care only charges \$3.40 for each medication if you are 19 years old or older. If a medication is not covered by the plan, your pharmacy may be able to charge you up to the full retail price of a medication. If the medication is not covered, have your provider submit a PA request to Envolve Pharmacy Solutions for review. Your provider may contact Envolve Pharmacy Solutions at 1-800-460-8988.

I have another insurance that pays for my prescriptions and they are not on your PDL, will those medications be covered?

If you have a primary insurance that covers medications that are not listed on our PDL, a PA request form will not be required. Inform your pharmacy that you have a primary insurance. ATC will cover the remaining costs of your medications once claims have been submitted to your primary insurance. You will only be responsible for paying a \$3.40 copay per prescription. If your pharmacy needs assistance with processing claims, they may contact the Envolve Pharmacy Solutions Help Desk at 1-800-460-8988.

How can I get my prescriptions filled even though I've met my prescription limit?

There is a limit of four prescriptions per month for adults ages 21 and older. If you go over this limit and your provider feels you need additional medications, an additional three prescriptions are available if the prescription meets certain specified criteria.

If the seven prescription limit has been met, the seven prescription limit cannot be exceeded and funds on the CentAccount card may be used. Also, some pharmacies have prescription programs that will fill a prescription for a small fee, e.g. \$4 for 30 days. Consult with your pharmacy about which options are available for you.

I just had surgery and have reached my monthly prescription limit. Do I have to pay out-of-pocket for my pain medication or will they be covered by the plan?

Unless your surgery is related to one of the medical conditions to which the monthly prescription limit override can apply, Absolute Total Care will be unable to pay for your pain medications.

Is it possible to find out whether a particular drug is covered prior to going to the pharmacy?

Most generic drugs are covered; however some generics may require a prior authorization. You or your provider may view a copy of our PDL by visiting:

<https://pharmacy.envolvehealth.com/content/dam/centene/envolve-pharmacy-solutions/pdfs/PDL/FORMULARY-ATC.PDF>.

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Absolute Total Care (ATC) complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex. ATC does not exclude people or treat them differently because of race, color, national origin, age, disability, or sex.

If your primary language is not English, language assistance services are available to you, free of charge. Call: 1-866-433-6041 (TTY: 711).

Si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 1-866-433-6041 (TTY: 711).

تخدما ةلمساعدا للغويةا فراتتو لك نبالمجا. تصلا برقم 866-433-6041 (قم رهااتف لصما لبكم او: 711).
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