

We Make the Prior Authorization Process Easy

The prior authorization process helps members get the right medication at the best price.

What is a Prior Authorization?

A prior authorization (PA) is a cost-savings initiative of your prescription drug benefit plan that ensures the appropriate use of certain prescription drugs. This program is designed to help prevent improper prescribing or use of certain drugs that may not be the best choice for a given health condition.

What types of medications might require a PA?

- Specialty medications
- Medications that have lower-cost, equally effective alternatives available
- Medications that should only be used for certain health conditions
- Medications that have stricter FDA guidelines on quantity, age, and diagnosis

How can a pharmacy, member, or member representative start a PA?

A PA can be initiated by contacting the CRx call center. The call center will direct the request to the PA team, who will then contact the physician.

How does the PA process work?

Step 1: The pharmacy will attempt to fill the prescription. If a medication requires a PA, the pharmacist will receive an alert with a message indicating “Prior Authorization Required.”

Step 2: The pharmacy will contact the physician to start the PA process.

Step 3: The physician will complete the PA request and send additional medical information supporting the request.

Step 4: The member and their physician will be notified regarding the decision. The member and their physician will receive an approval or denial letter.

- If approved, the pharmacy to reprocess the claim.
- If denied, the physician may suggest alternative medications for the member's condition or appeal the denial by completing the Prior Authorization appeal form.



We're here for you!

Call us at 877-646-1716

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