

Pharmacy Benefit Clinical Appeal Process

General Information

The pharmacy benefit clinical appeal process consists of two levels of review. The first level is essentially a confirmation that the claim denial properly reflects plan guidelines, and that all information related to the claim was taken into consideration. The second level is the formal appeal process, and requires submission of a pertinent information by the prescribing physician.

Review/Appeal Process

FIRST LEVEL APPEAL	SECOND LEVEL APPEAL	FINAL APPEAL
<p>Level 1 - The member or prescribing physician can call the Express Scripts toll free number (on back of Express Scripts ID card), or send a letter with additional information that may not have been considered at the time of processing. Express Scripts will review this information to ensure the claim was processed within the guidelines of the plan.</p>	<p>Level 2 - If Express Scripts determines that the claim was denied in accordance with plan specifications, the member can submit a formal appeal to Express Scripts with supporting documentation from the prescribing physician. This appeal review is conducted by a third party committee that consists of independent physician specialists. A written response to the appeal will be provided within 30 days of the panel's receipt of all information required for completion of the review.</p>	<p>Level 3 – If you are not satisfied with the decision of your second level appeal you may be eligible for a third level appeal as outlined in the response letter.</p>
<p>Level 1 Review Requests should be sent to:</p> <p>Express Scripts Inc, Att: PA dept. 6625 West 78th Street, Mail Route BL0345, Bloomington, MN 55439</p> <p>The FAX # is 1-800-357-9577.</p>	<p>Level 2 (formal) Appeals should be sent to:</p> <p>Express Scripts, Inc. Clinical Appeals - Q54 6625 West 78th. Street Mail Route BW1041 Bloomington, MN 55439</p>	

Helpful Hints

1. Make sure you complete Level 1 of the review process prior to initiating the formal Level 2 appeal
2. You or your physician have the right to request a copy of the applicable coverage policies and guidelines involved in the initial and Level 1 denials by sending a letter to Express Scripts, Attn: Prior Authorization Research - Q54, BW1040, 6301 Cecilia Circle, Bloomington, MN 55439.