

# FAQ- Submitting a Prior Authorization using the CoverMyMeds integration (Web)

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## What is the member ID when completing the PA questionnaire?

The member ID is the patient's insurance number.

## Can multiple documents be attached to a PA request?

No, only one document can be attached per NCPDP standard.

## Why do I receive a drop down field after entering N/A to question?

The field drop down that you are receiving after entering N/A is generated by the payer. They require a certain amount of fields to be answered prior to submitting a request.

## What is the workflow for PA Requests that are initiated by the pharmacy?

When a pharmacy finds a prescribed medication as requiring a PA, often they will attempt to initiate the prior auth via CMM. When this occurs, the prescribing office will then receive a fax indicating this as the next step - that the PA was initiated, and if the staff would like to pick up where the pharmacy left off, they can utilize the key that comes over with the fax to link up to the existing PA.

Using the key received, the provider will then need to log in to the CoverMyMeds Standalone portal to complete it. To track the request, the provider can create a manual authorization to keep the history in DrChrono or keep it in the CoverMyMeds portal.

## If I receive a PA Request via fax from CoverMyMeds can I still access my account in CoverMyMeds' portal?

Yes, if you use the Key + Patient DOB + Patient Last name you will be able to pull up any PA request initiated in the app (that has been sunset effective August 31, 2023).

## Why am I receiving this error?



The Rx BIN is a crucial number utilized by health plans for processing electronic pharmacy claims, while the PCN serves to identify the drug benefit processor (PBM). Although the PCN and BIN fields are optional for the payer, users are unable to input this information into DrChrono. If the patient's benefits lack the PCN or BIN, a warning message will be triggered, preventing the user from initiating a PA request for the patient.

All patient insurance must be entered correctly. When running a prescriptions benefit check the PBM Name, BIN and PCN must be present in the summary.

## Attachment Parameters Supported

CoverMyMeds has specific requirements for attachments to ensure a smooth process:

- **Attachment Size:**
  - For electronic prior authorizations: Up to 10MB.
  - For classic prior authorizations: Must be between 5KB and 5MB.
- **Accepted File Types:** Attachments should be in one of the following formats: .pdf, .tiff, .tif, .jpg, .jpeg, .jpe, .png.
- **File Name Limit:** File names should not exceed 50 characters.

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