Provider Office Staff Exceptions and Appeals Checklist

Steps for consideration toward obtaining the patient's medication:		Yes	No
1	I have been notified that my patient's medication is not covered by the patient's health plan or that the patient will need to pay a high price or meet other requirements before obtaining it		
2	I have contacted Provider Relations at the patient's health plan for guidance, asked to speak with the "exceptions and appeals representative," if applicable, and have obtained a copy of the plan's Exceptions and Appeals process		
3	I have obtained the correct form from the patient's health plan, or because the patient is enrolled in a Medicare Part D plan, I will use the "Request for Medicare Prescription Drug Coverage Determination" form available from Medicare		
4	I have obtained a supporting statement from the prescribing physician, if required		
5	If filing an appeal, I have followed all steps in the appeals process in the order specified		
6	I understand that the timing of a response from the patient's health plan will vary by plan and by the state the patient lives in		
7	I have checked with the patient's health plan for any special or required rules for obtaining the medication		
8	I have evaluated the available options for obtaining the medication (Specialty Distributor, Specialty Pharmacy Provider) for potential cost savings, and discussed with my patient		

Resource	Website
Centers for Medicare & Medicaid Services (CMS) • Request for Medicare Prescription Drug Coverage Determination Form	cms.gov/Medicare/Appeals-and-Grievances/ MedPrescriptDrugApplGriev/CoverageDeterminations-
Medicaid Exceptions and Appeals Processes (may vary from state to state)	medicaid.gov/about-us/contact-us/contact-state-page.html

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