



# Prior Authorization

## What you need to know

Sometimes a drug needs approval before your prescription is filled. This is called prior authorization, or PA for short. During the PA process, the Liviniti team connects with your doctor's office to get the clinical information needed for review. This may include your diagnosis, treatment history, proposed therapy and test results.

Your treatment is reviewed against your plan's clinical requirements, and Liviniti evaluates various factors to determine whether the medication meets your plan's coverage requirements. If your PA is approved, the pharmacy can fill your prescription. If your PA is denied, Liviniti will share your options with you. Your doctor may prescribe an alternative medication that meets your plan's requirements, or you or your doctor may appeal the denial.

### Is a PA required for your drug?

When possible, it's a good idea to find out if your drug requires a PA before you fill it. For this, you'll need your pharmacy group number, which is assigned to your plan and available on your ID card. You may also call Liviniti to get your group number or request it from your employer. Using the Your Company Page, just follow the directions below:

- Go to [Liviniti.com](https://liviniti.com) and click "Members" to reach the Member Center.
- Scroll down to Your Company Page and enter your group number.
- Search any medication to see if a PA is needed. Select your plan, enter the drug name and click Search.
- A drug that requires a PA will show the "PA" designation at far right.

It is your doctor's responsibility to start the PA process and submit the required information. If needed, call Liviniti for help starting the process.

You may also decide to ask your doctor about other treatment options. A short-term fill may be requested so you can continue your treatment without interruption while the PA process is completed.

Use the Liviniti mobile app to check the status of your PA at any time. In the app, click Prior Authorization in the top navigation. Green means the PA has been approved, blue means it is under review, and red means it has been denied.



### DOWNLOAD THE MOBILE APP



**In the app store, search for Liviniti or Southern Scripts.**

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## Levels of Appeal

If your PA is denied, there are three levels of appeal available. Each level must be completed before the next one begins.

### FIRST-LEVEL APPEAL

You have 180 days from the date of denial to submit your request, and it will be reviewed within 3 days, excluding weekends and holidays.

### SECOND-LEVEL APPEAL

If the first-level appeal is denied, you have 120 days from that decision to request a second-level appeal, which is also reviewed within 3 days, excluding weekends and holidays.

### EXTERNAL APPEAL

If the second-level appeal is denied, you have 120 days to request an external appeal, which is reviewed within 3 days, excluding weekends and holidays. The external review decision is legally binding and final.

Appeals may be requested by phone, email, [promptpa.com](https://promptpa.com), electronic prior authorization, or fax. Urgent appeals may only be requested for clinical-based appeals by your physician and are reviewed within 24 hours. Timeframes may vary based on federal or state statutes.

**Questions? Just call the number on your ID card.**

### PRIOR AUTHORIZATION VIDEO

Use the QR code to launch a video explaining the PA process.

