



John M. Henderson, D.O.

SUBJECT: Prescriptions Renewals, New Prescriptions Requests, and Rx Prior Authorizations Policy

To all parties involved,

I understand that in today's convoluted health care environment, understanding your prescription coverages can be a monumental task at times. The following policy has been enacted to allow for the most efficient processes to ensure that all requests are handled in an accurate timely manner.

PRESCRIPTION RENEWALS

1. The only accepted forms of prescription renewal requests are outlined below by medication type.
 - a. All **non-controlled** prescription renewals are to be submitted by the pharmacy through the electronic prescription renewal system. Or through your patient portal account.
 - b. All **Schedule 1-5 controlled substance** renewals **MUST** be initiated by the pharmacy through the EPCS system. We will not accept any other methods of request, to include through the patient portal accounts.
 - c. Patients using the Ft. Benning DOD Pharmacy are the only persons authorized to call for their prescription renewals. The DOD does not have electronic renewal request capabilities. When calling to request a renewal you **MUST** verify the medication name, dosage, and frequency. When you call a message will be submitted and the standard turn-around times apply.

NEW PRESCRIPTIONS / REQUESTS

1. If you are prescribed a new prescription at your appointment it will be sent to your pharmacy before the end of the day.
2. If you are calling to request a new prescription, the standard message turn-around time of 2 business days will apply. Once it has been approved there is an additional 1 business day allotted for the prescription to be sent.
3. If a new prescription is sent it is your responsibility to understand your prescription coverages, and how to verify them.
 - a. A lot of formularies have what's called "preferred pharmacy" agreements in place. Meaning the same prescription that's free at CVS may cost you 25 dollars at Walgreens. You need to know your formulary's preferred pharmacy.
 - b. They also have preferred medications and tend to cover the medications in "Tiers". Meaning if we prescribe medication "X", they may want you to try "Y" first.
 - c. Or they may only cover "B" even though we prescribed "A". Both A and B do the same thing, they're simply different brands.



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PRIOR AUTHORIZATION(S) REQUESTS

1. If you are prescribed a medication that isn't covered by your insurance company and a prior authorization is needed:
 - a. Your pharmacy will tell you that the prescription isn't covered, and a PA is needed. If they do you will have to contact our office to initiate the PA process.
 - b. There will be a **1 business day review** of the PA request. A staff member will contact you of the decision, advise you of any fees involved, and request and/or request any additional information needed.
 - c. There may be a **fee of 10 dollars** associated with the PA. You will be made aware of the fee before work is started.
 - d. If our office receives the faxed PA request from your pharmacy a staff member will try to contact you to verify, and explain your options.

****A lot of times when a prescription isn't covered there is a covered alternative. When you are talking to your pharmacist, they may be able to advise you if there is something else covered. If there is, you just need to contact our office and let the doctor know. If he agrees with its use, he will just prescribe the covered alternative instead. Avoiding fees, and the long drawn out PA process.**

A handwritten signature in black ink, appearing to read 'John M. Henderson', with a large, loopy flourish on the left side.

Dr. John M. Henderson DO PC