

Pharmacy Reference Guide




Providers and pharmacies with questions regarding AmeriHealth Caritas District of Columbia's benefit coverage or claims transmission issues may call Pharmacy Provider Services at 1-855-332-0992 for assistance.	
Pharmacy network and contracting	Phone: 1-800-555-5690 Email: pharmacynetwork@performrx.com
Pharmacy prescription claims processing information	Darwin Pharmacy Solutions: AmeriHealth Caritas District of Columbia Bank identification number (BIN): 019595 Processor control number (PCN): PRX02826
Pharmacy online directory	https://ahcdc.darwinrx.com/pharmacylocator

Prior authorization	
Phone: 1-855-332-0992	Standard Fax: 1-844-480-2486 , Urgent Fax: 1-855-350-0284
How to submit a request for pharmacy prior authorization	
Online	<p>Use the online prior authorization form. Visit www.amerihealthcaritasdc.com/hdcp/providers/resources/pharmacy-prior-auth-forms and select the Online Pharmacy Prior Authorization Request Form. Providers can use this form to:</p> <ul style="list-style-type: none"> • Electronically submit all relevant enrollee information • Attach enrollee-specific documents, such as lab results, chart notes, and consultation documentation • Save unique provider information to expedite future web submissions • Print a summary page for easy reference
By fax	Fax the Universal Pharmacy Prior Authorization Form to 1-844-480-2486 (Standard Fax) or 1-855-350-0284 (Urgent Fax)
By phone	Call Pharmacy Services at 1-855-332-0992
Specialty and injectable medications: Specialty drugs include unusually high-cost oral, inhaled, injectable, and infused pharmaceuticals prescribed for a relatively narrow spectrum of diseases and conditions.	



Plan limitations	
Days supply	≤ 34
Transition supply	Available during the first 60 days in which enrollees are newly enrolled with the plan
Refill frequency	≥ 85 percent of the medication must be utilized (26 days of a 30-day supply).

Formulary	
Copay	\$0 copay for brand or generic medication
Mandatory generic	Requests for “brand necessary” require prior authorization.
Closed	All formulary decisions are voted on by the Pharmacy and Therapeutics committee and approved by the Department of Health Care Finance.
Searchable formulary 	For the most current formulary information, visit https://client.formularynavigator.com/Search.aspx?siteCode=7359288139 . You can also scan the QR code at left with your mobile device.
Printable formulary	For the most current formulary information, visit https://www.amerihealthcaritasdc.com/content/dam/amerihealth-caritas/acdc/hdcp/pdf/provider/formulary-hdcp.pdf.coredownload.inline.pdf
Prior authorization required (list is not exhaustive)	<ul style="list-style-type: none"> • All non-formulary medications • Formulary medications that have a prior authorization required • All prescriptions that exceed plan limits • Compound prescriptions that exceed \$300 • Early refills
Other notes	<ul style="list-style-type: none"> • Over-the-counter (OTC): Some products may be covered with a prescription • Out-of-network pharmacy services require an override



Covered Durable Medical Equipment - Pharmacy	
Blood glucose meters (one meter per 365 days)	Roche® products • Accu-Chek® Guide glucose meter
Continuous Glucose Monitors (one reader per 365 days)	Dexcom & Freestyle Libre
Diabetes testing supplies*	Accu-Chek® Lancets Test Strips Accu-Chek® Accu-Chek® Control Solution Alcohol Swabs^
Peak Flow Meters (one meter per 365 days)	Various Products Covered^
Spacers (two spacers per 365 days)	Various Products Covered^
^Please refer to plan formulary for any additional restrictions or specific products covered. *Supplies covered are products compatible with covered glucose meters.	
Note: Any DME items not on this list would be handled by the AmeriHealth Caritas District of Columbia Utilization Management (UM) department. The UM department can be reached at 1-888-605-4807 or 1-800-408-7510 . DME requests can be faxed to 1-877-759-6216 .	
Only products listed by Medi-Span and loaded into Darwin Pharmacy Solutions are potentially billable via the pharmacy benefit.	