



## Medical Benefit Prior Authorization Submissions

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Due to the complexity of clinical reviews and the clinical information required, Neighborhood's Pharmacy Department encourages electronic or email submission of requests to minimize the back and forth in gathering the supporting records to evaluate medical necessity.

### **Electronic Prior Authorization Form (eForm)\***

- eForm is designed to allow providers to submit requests electronically via our Neighborhood Pharmacy Provider Resources Webpage for certain medical benefit drug requests.
- eForm provides an alternative to manually faxing Prior Authorization requests for medical benefit drugs and minimizes administrative burden.

Visit <https://www.nhpri.org/pharmacy-general-medical-authorization-eform/> to get started!

### **Secure Email\***

- Neighborhood's Pharmacy Department is now accepting Medical Benefit Drug Requests via secure email at [RxMedicalBenefits@nhpri.org](mailto:RxMedicalBenefits@nhpri.org).
- Secure email provides an alternative to manually faxing Prior Authorization requests for medical benefit drugs and minimizes administrative burden.

*\*This solution does not replace ePA through Covermymeds for pharmacy benefit requests.*