



Pharmacy Coverage Determination Timeframes

Neighborhood News - July 2022

The Centers for Medicare & Medicaid Services (CMS) require health plans to render a decision for INTEGRITY (MMP) pharmacy coverage determination requests within 24 hours for expedited cases and 72 hours for standard cases.

- To ensure timely access to medications, Neighborhood encourages all providers to supply their supporting statements or clinical documentation at the time of request of coverage determinations to minimize the need to appeal denials issued during the initial review.

You may fax prior authorization requests for Neighborhood INTEGRITY members to 1-855-829-2875 or submit via CoverMyMeds at <https://www.covermymeds.com/main/prior-authorization-forms/caremark/>.