

PHARMACY UNIT – AUTHORIZATION OVERVIEW
Revised April 15th , 2011



1. Verify Member's Eligibility with CareOregon

To determine the member's eligibility, use either the State's MMIS or CareOregon's system at:

<http://www.careoregon.org/Providers/ProviderPortalLogin.aspx>

Please note - member's eligibility and/or coverage may change AFTER an authorization has been issued. The authorization will NOT be valid if at the time of service the member NO longer has coverage for the service that was previously authorized.

2. Determine Correct Pharmacy Reference Tool to Use

CareOregon authorization requirements are found on the CareOregon website. To view the correct document, you need to know the following information:

- Determine the member's primary insurance coverage; CareOregon Plus/Standard or CareOregon Advantage Plus/Star
- Determine where the drug will be dispensed and billed; from a pharmacy or at a office/clinic/hospital.

Based on the member's primary insurance coverage and where the drug will be dispensed/billed, see the next section to determine what reference material you need to use to determine if the drug requires an authorization.

3. Determine Drug Authorization Requirements

For drugs obtained at a pharmacy:

- CareOregon OHP (Plus and Standard members) Formulary
- CareOregon Advantage (Plus and Star Members) Formulary

See CareOregon Pharmacy Help Desk to do a drug search or view the formularies:

<http://www.careoregon.org/Providers/PharmacyHelpDesk/FormularylistAndUpdates.aspx>

For injectable drugs provided and billed by a non-pharmacy provider in their office, clinic, or outpatient facility:

- Authorization Guidelines – Injectable Drugs (for both CareOregon Advantage and OHP Members):
http://www.careoregon.org/Res/Documents/Providers/AuthGuidelines_InjectableDrugs_3-17-11.pdf

For injectable drugs needed for the treatment of **bleeding or clotting disorders**:

- Authorization Guidelines – Injectable Drugs for Bleeding and Clotting Disorders (for both CareOregon Advantage and OHP Members):

http://www.careoregon.org/Res/Documents/Providers/AuthGuidelinesOHTC_Provided_Drugs_3-17-11.pdf

4. Determine Authorization Form To Use:

For a drug obtained from a pharmacy, complete the "Prior Authorization and Formulary Exception Form":

http://www.careoregon.org/Res/Documents/Providers/Prior_Auth_Formulary_Exception_Request_Form.pdf

For an injectable drug provided by a non-pharmacy provider in their office, clinic, or outpatient facility, complete the "Injectable Authorization Form":

http://www.careoregon.org/Res/Documents/Providers/InjectablePA_RequestForm_3-17-11.pdf

For an injectable drug in an **inpatient** hospital setting, complete the "Facility Authorization Form":

<http://www.careoregon.org/Res/Documents/Providers/FacilityAuthForm.pdf>

CareOregon Customer Service:

503-416-4100 or 1-800-224-4840 (toll free)