CompletEPA® **FAQs**

How do manual prior authorizations impact hospitals and IDNs?

On average, physicians spend more resources handling prescription prior authorizations than any other interaction. Prior authorization takes three to eight hours each week and costs thousands of dollars each year per physician.

How does the manual prior authorization process impact patient care?

Twenty to thirty percent of patients never pick up prescriptions that require prior authorization. Sixty-nine percent of patients that get their medications report waiting two or more days for prescription approval.

What are the requirements to leverage CompletEPA functionality?

CompletEPA is currently available for Epic 2014 and 2015 users. Hospital Systems should work with Epic to secure the appropriate license to implement CompletEPA.

Are there other Epic sites currently using CompletEPA?

Yes, there are Epic users who are live and using CompletEPA today for prior authorizations as well as many other EHR users.

Does CompletEPA work for specialty medications?

Yes, CompletEPA utilizes the NCPDP ePA standard, which fully supports specialty medications.

Does CompletEPA work with controlled substances?

Yes, CompletEPA fully supports electronic prior authorization of controlled substances, even if the medication is not electronically prescribed.

Do providers need to process prior authorizations with CompletEPA?

No, CompletEPA allows flexibility in who processes electronic prior authorizations using permissions already defined in the Epic application. This allows hospital systems and clinics to continue processing prior authorizations according to their current workflow. However, CompletEPA allows for faster, more efficient, real-time responses.

Is it necessary for a provider to fill out a paper form or visit a website with CompletEPA?

No, CompletEPA is completely integrated within the Epic workflow and does not require the physician to leave the familiar context of their EHR to answer prior authorization questions.

Will providers have to enter patient and provider demographics or medication information into a form?

No, CompletEPA is fully integrated into the Epic workflow, allowing the automatic transmission of all patient and provider demographic and medication information to the correct payer, at the touch of a button, with no work required for the provider.

How many questions will a physician be required to complete in order to submit a prior authorization?

CompletEPA connects physicians directly to the patient's payer through their Epic connection. This means that while submitting a prior authorization with CompletEPA, physicians are presented with only the relevant questions for the patient, plan and medication involved.

Will the prior authorization request be transmitted in real-time, directly from my Epic workflow to the patient's health plan or PBM?

Yes, with CompletEPA, your electronic prior authorization request is transmitted directly from your Epic EHR to the patient's health plan or PBM. In most cases, the health plan or PBM will respond in a matter of seconds.

Will providers be informed of approval or denial decisions in real-time?

Yes, CompletEPA's connectivity to health plans and PBMS ensures that providers get real-time approval or denial decisions within the Epic application, often seconds after submitting a completed question set.

If a prior authorization is denied, can the appeal process be started from within the existing e-prescribing workflow?

Yes, CompletEPA fully supports the electronic appeals process.

What if the pharmacy calls saying a prior authorization is required after the patient has left the office?

CompletEPA supports both prospective and retrospective prior authorizations.

Do providers need to know who a patient's health plan or PBM is prior to initiating an electronic prior authorization?

No, the CompletEPA functionality is tightly integrated into the e-prescribing workflow. This allows CompletEPA to use a patient's coverage information from the benefits transaction to automatically route an electronic prior authorization to the correct payer.

How does Surescripts ensure that CompletEPA utilizes the most current formulary data for medications requiring prior authorization?

PBMs update their formularies weekly and since prior authorization with CompletEPA is a real-time transaction, the data is always current.

What PBMs and health plans does CompletEPA connect to?

CompletEPA currently connects to PBMs representing eighty percent of the nation's covered lives, with more planned to come on line throughout 2015. For a detailed list of our participating PBMs and the health plans they represent, please contact your Surescripts Account Executive.