

# Pharmacy Reimbursement Appeals Process

## MAC Appeals

In accordance with certain state laws, Network Provider may appeal MAC pricing. MAC appeals, when permitted, should be filed online through the Pharmacist Resource Center (PRC) website which can be accessed at <https://prc.express-scripts.com>. In the event Network Provider is unable to submit appeals through the PRC because the PRC has been down for greater than four (4) hours, Network Providers may contact Express Scripts at the Pharmacist Use Only telephone number(s) for assistance in filing the appeal and for more information.

All MAC appeals must include adequate information to allow Express Scripts to analyze the MAC appeal, including any data requested through the PRC. If Network Provider has not provided sufficient information, Express Scripts may request additional information from Network Provider. A MAC appeal will not be considered complete until all requested information has been received by Express Scripts.

The right to appeal is generally limited to ten (10) business days (unless different timing is required by law) following the date the claim in question is successfully adjudicated. Appeals will be investigated and resolved by Express Scripts as soon as practicable and within any timing prescribed by law. Express Scripts shall communicate the results of any appeal to Network Provider via email(s). In the event a Network Provider's appeal is successful, the relevant MAC Price will be adjusted as of the date of the determination for Network Provider and similarly situated Network Providers. Any additional details relating to a successful MAC appeal will be communicated directly to Network Provider via email(s).

## Claims Not Subject to Appeal

Only drug products reimbursed using MAC are eligible for MAC appeal. The parties agree that a contracted discount off an average wholesale price (AWP) does not constitute MAC and is generally not eligible for appeal. Single source branded drugs are not eligible for MAC appeals. In addition, certain Sponsor's claims may not be eligible for MAC appeals, or a state-specific MAC process (i.e. Medicare claims or TRICARE claims). If Provider is unaware or unsure if a product was paid using MAC, Provider may contact the Pharmacist Use Only Line. Provider acknowledges that submitting invalid MAC appeals creates an administrative burden on Express Scripts and, accordingly, Providers that routinely file MAC appeals for claims not reimbursed using MAC or for ineligible Sponsors may be required to reimburse Express Scripts for relevant fees and costs associated with the appeals.

## Tennessee Regulatory Addendum

1. **MAC Appeals.** As explained above, Express Scripts has developed a clearly defined process through which Provider may contest the reimbursement amount for a particular drug or medical product or device. The process described below complies with applicable Tennessee law, including the timing and notice requirements set forth in Tenn. Code Ann. § 56-7-3108.

**Who can appeal:** Provider can file appeals. Provider has the right to designate a pharmacy services administrative organization or other agent to file and handle its appeal of the actual reimbursement.

**Basis for filing appeal:** A pharmacy may base its appeal on one or more of the following:

- a. The maximum allowable cost established for a particular drug or medical product or device is below the cost at which the drug or medical product or device is generally available for purchase by pharmacies in this state from national or regional wholesalers; or
- b. Express Scripts has placed a drug on the list without properly determining that the drug is generally available for purchase by pharmacies in this state from a national or regional wholesaler.

## Timing for Provider to File Appeals and Express Scripts to Resolve Appeals

Provider must file its appeal within seven (7) business days of its submission of the initial claim for reimbursement. Express Scripts must make a final determination resolving Provider's appeal within seven (7) business days of receipt of the appeal.

## Description of Appeal Outcomes and Process

If the final determination is to deny the Provider's appeal, Express Scripts will explain the reason for the denial and provide the national drug code of an equivalent drug that is generally available for purchase by pharmacies in Tennessee from national or regional wholesalers at a price which is equal to or less than the maximum allowable cost for that drug at the time that Provider is notified of the appeal denial.

If the final decision is to approve the Provider's appeal, Express Scripts will adjust the maximum allowable cost of the drug or medical product or device for Provider. The adjustment for Provider is effective from the date Provider's appeal was filed. Express Scripts will provide reimbursement to Provider and may require the appealing pharmacy to reverse and rebill the claim in question in order to receive the corrected reimbursement.