ExpressPAth Quick Start Guide

Getting Started

ExpressPAth is an online tool that providers can use to submit prior authorization requests. Use it to:

- Submit requests for prior authorization
- Check on the status of submitted requests
- Submit an authorization renewal on a previously submitted request

Benefits of using *ExpressPAth* for your practice include:

- Easy access. With 24/7 access, you can submit requests and get answers at any time.
- Increased efficiency. Using *ExpressPAth* helps eliminate the time you spend on the phone or filling out paper forms.
- Email notifications. Receive email notifications once a decision (approved or denied) is reached instead of checking for faxes or calling the health plan again.
- Submit renewals online. Submit prior authorization renewals up to 90 days prior to expiration to prevent potential lapses in your patients' therapy.

Access ExpressPAth by visiting: https://www.express-path.com

Registering for ExpressPAth

Registration for ExpressPAth is required so that ESI can validate the National Provider Identifier (NPI) of each provider using the tool. To register for ExpressPAth:

- Visit **https://www.express-path.com**. Select *Click here to register* on the left-side of the screen.

Step 1: Prescriber or Providing Facility Registration

A *Prescriber* (Physician, Physician's Assistant, Nurse Practitioner, Pharmacist) or *Providing Facility* (Physician's Office, Home Infusion Therapy Provider, Outpatient Facility, Specialty Pharmacy, or Dialysis Center) will need to have the following information available to register:

- National Provider Identifier (NPI)
- Work E-mail Address

Step 2: Agent Registration
An *Agent* is any person who performs authorization tasks on behalf of a Prescriber or Providing Facility (e.g., Nurses, Office Managers, Billing Managers, etc.). Once an Agent's Prescriber or Providing Facility receives the activation e-mail, the Agent can register to use ExpressPAth, too. An Agent will need the following information available to register:

- National Provider Identifier (NPI) of all Prescribers or Providing Facilities for which they will be performing authorization requests
- Work e-mail address.

NOTE: At this time, a maximum of 10 prescribers/providing facilities can be requested during registration. However, an Agent can go into the Settings tab under My Physicians and request association to an unlimited number of physicians after they have registered.

Step 3: Prescriber/Providing Facility Confirms Agent Registration
Once an Agent has registered, each Prescriber or Providing Facility to whom an Agent has requested association will receive an e-mail requesting that they click a link to go into ExpressPAth to assign privileges to the Agent (e.g., Initiate a PA, Check Status of a PA, etc.) and activate them. Once the Prescriber or Providing Facility has completed this final step, the Agent will receive an e-mail that they have been activated by that Prescriber/Providing Facility. *At that point, the Agent (with appropriate privileges) can begin entering authorization requests using ExpressPAth.*

Initiate a Prior Authorization Request

ExpressPAth reduces the time your organization spends on the phone or filling out fax forms by automating the prior authorization process. The system guides you through the authorization process by asking you for information about the member, drug and prescriber.

To begin creating an Episode of Coverage (EOC) – the term for a single authorization request in *ExpressPAth* – from the Home page, click ***Initiate a New Prior Authorization Request***.

Prior Authorization Portal for Providers.

Initiate a new Prior Authorization request
Create/initiate a new Prior Authorization request for your patients using this website. There is no need to call or send faxes to obtain a Prior Authorization.   [Go]

Complete existing Prior Authorization requests
Complete existing Prior Authorization requests that were initiated by you or your patient's insurance plans and require your input.   [Go]

Search for a previously submitted Prior Authorization request
View the status or update NPI or appeal a previously submitted Pharmacy Prior Authorization request for your patients. Search by patient details such as member number, date of birth, etc. and view the status or update NPI or appeal a previously submitted Pharmacy PA form.   [Go]

Renew a Prior Authorization request
If your patient has an approved PA and the request is about to expire in the next 90 days and would like to renew the request, click Go.   [Go]

Step 1 – Search for Patient

Choose the patient's health plan from the *Select Insurance* dropdown. Enter the patient's Member ID, or you can enter their Last Name, First Name and Date of Birth. Click *Search.*

Step 2 – Select Patient

Find the correct patient and verify their eligibility status. Click on the hyperlink to the patient's name to proceed.

Step 3 – Select Drug/Service

Only one drug can be entered on a prior authorization request in *ExpressPAth*.

Enter the drug name, HCPCS/CPT code or NDC and click *Search*. Then select the appropriate NDC by clicking on the hyperlink in the pop-up box that appears. Click *Next*.

Step 3 : Search and select drugs or ancillary services ❓

Selected Drug/Service List (Click on 'Add' to add Drug/Service.)
No Drug/Service selected
Add drug/service

Search for Drug by NDC, Drug Name or HCPCS/CPT Code

NDC: [_____] ^   Or   Drug Name: [Remicade] ^

Or

HCPCS/CPT code: ❓ [_____] ^   [Search]

Or

Search for services.

Select a Service: [_____▼] ^   [Add]

^ At least one field is required to perform a search for a drug or service

[Save]   [Back]   [Next]

NOTE: *If you don't have time to complete the request after the patient and drug have been selected, you can save your EOC and return to complete it within ten calendar days.*

Step 4 – Step Therapy Alternatives

There are currently no step therapy alternatives configured. *ExpressPAth* will automatically skip this step for you.

Step 5 – Additional Information

You will need to enter the following physician's order information in *ExpressPAth*:
- *Dosage, Frequency, Patient's Weight, Directions*

ExpressPAth will auto-fill the following information, but you do have the option to edit these fields:
- *Quantity, Duration, Route, Start Date of Service, End Date of Service, Urgency*
  - *Quantity, Duration and End Date of Service* are calculated based on the *Dosage and Frequency* entered
  - The *Start Date of Service* defaults to the current date, but should be updated to the first date that the drug will be administered
  - *Urgency* defaults to No, but can be changed to Yes if necessary.

Step 6 – Select a Site of Care

Select the site of care where the drug is going to be administered/obtained

Step 7 – Verify Prescribing Physician

Choose the prescriber from the dropdown menu. Click the *Next* button.

Step 8 – Select Rendering Provider

If the provider of the medication has the same NPI as the prescriber, you can keep the defaulted selection at the top of Step 8. If a different facility will provide the medication, you can search for that facility's NPI and add them instead.

Step 9 – Complete Questionnaire

Click the *Answer* link to bring up the clinical questionnaire for the drug you selected. As you begin to answer the questions, future questions that are no longer relevant will become disabled. If you need to print the questions to fax to the prescriber in order to receive further

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clarification, click the *Print* hyperlink to print a PDF document (all of the answers that you have already answered will be populated) and then *Save* the request to come back to it later (within ten calendar days). Once all required questions have been answered, click *Next Step*.

Step 10 – Attach Supporting Documents

If you have a scanned image (such as clinical or lab results) on your computer, you can click *Browse* to locate the file and then click *Open.* Type a brief description of the attachment and select the Document Type from the dropdown and click the *Attach* button.

If you have documentation that you would like to fax to Care Continuum, you can download a copy of the fax cover sheet (see the here link under the Comments section) and fax supporting documentation.

Finally, make any additional comments and click the *Submit* button. You will be notified that you can't make any changes to the request once you submit. Click *Yes* if you are ready to submit.

Step 11 – Review Submitted

Once the review is submitted, you will receive a message that the authorization has either been automatically *Approved* or *Submitted.*

If the request is automatically approved, you can rest assured that your PA decision will not change.

If the request is Submitted, the request will go to a nurse case manager and possibly a medical director at Care Continuum to make the decision. You should see a decision status reflected in *ExpressPAth* within your health plan's required turnaround times. Click *OK* to remove the pop-up message from the screen. If your email notification settings are set to High under the Settings tab in the My Information link, you should also receive an email with the decision.

You are presented with three options to proceed in *ExpressPAth*:
- *Home* – Takes you back to the main screen where you can Initiate a New Prior Authorization Request for a new patient
- *Additional PA* – Allows you to create a new prior authorization request for the same patient. After clicking this button, you will be taken to Step 3: Select Drug/Service
- *Search PA's* – Takes you to the Search for a Previously Submitted Prior Authorization Request screen, where you can review the status of any submitted PA request

Complete Existing Prior Authorization Request

Once Step 3 – Select Drug/Service is completed during the Initiate a Prior Authorization Request process, you can save the request and come back to complete it within ten calendar days. Click the *Complete existing Prior Authorization requests* link, then you can either scroll through your incomplete requests or click the *Filter By Patient* link to search for the EOC by patient name or other search criteria.

NOTE: *If you have not completed your request within ten calendar days, the EOC will automatically be purged from the ExpressPAth system and you will need to start over to initiate a new prior authorization request.*

Search for Previously Submitted Prior Authorization Requests

In order to review the decision status of a previously submitted prior authorization, you must click the *Search for a previously submitted Prior Authorization Request* link on the Home screen.

Once you click the link, you will see several search options. It is best to search by either the Prior Auth (EOC) ID or the patient's first and last name or member ID in order to narrow down your search results.

Scroll down to view the search results and to see the status of your request. For each EOC ID that appears in the search results, you will see information such as the patient's name, member ID, date the auth was requested, status, prescribing physician, as well as the drug and dosage requested.

The following Status messages may display in *ExpressPAth*:
- *Approved*
- *Denied*
- *In Progress* – the authorization is being reviewed by Care Continuum. Once a decision has been reached, a status of either Approved or Denied will display.

To view more details about a particular EOC, you can either click on the link with the patient's name or click the link under the Status field.

If an authorization is Approved, you will see the information that was requested in the first section on the details page, followed by the Authorized Drug Details section which outlines what was actually approved (since this may be different than what was originally requested). You will also be able to view the approval notification that was sent to the prescribing physician.

If the authorization has a status of Denied, you will see the information that was requested. The next section will give a denial reason (or Outcome Explanation). The denial notification that was sent to the prescribing physician displays in the final section.

If the authorization has a status of In Progress and you click the patient's name or the status, you may see a denial reason in the Outcome Explanations field. This does not mean that your decision is denied. The system automatically generates a denial reason for prior authorization requests that don't immediately meet the clinical criteria answered in Step 9. A nurse and potentially a medical director at Care Continuum will review all requests and determine whether to uphold the system-generated denial or issue an approval.

The following links may also display in *ExpressPAth* depending on the current status of the request:
- *Renew* – Only displays for requests that will expire in 90 days or less with a status of Approved
- *Withdraw* – When a prior authorization request shows a status of In Progress, you may have the ability to withdraw or remove the request from ExpressPAth
- *Copy & Update PA* – This link displays only for Approved requests, and functions the same as the Add PA button at the end of the Initiate a Prior Authorization Request process
- *Update NPI* – OSUHP users will not use this link

NOTE: *You will only see prior authorizations (EOC's) that are associated to your provider in ExpressPAth. If the patient has other prior authorization requests for drugs or services from other prescribers/providers, you will not be able to view those in ExpressPAth.*

Renew a Prior Authorization Request

Renewing a prior authorization request in ExpressPAth is easy! You can proactively manage renewals for approved prior authorizations that will expire in 90 days or less by clicking on the *Renew a Prior Authorization request* link on the Home page. Using this feature in *ExpressPAth* will help to prevent lapses in your patients' therapy.

Prior Authorization Portal for Providers.

Initiate a new Prior Authorization request
Create/initiate a new Prior Authorization request for your patients using this website. There is no need to call or send faxes to obtain a Prior Authorization.

Go

Complete existing Prior Authorization requests
Complete existing Prior Authorization requests that were initiated by you or your patient's insurance plans and require your input.

Go

Search for a previously submitted Prior Authorization request
View the status or update NPI or appeal a previously submitted Pharmacy Prior Authorization request for your patients. Search by patient details such as member number, date of birth, etc. and view the status or update NPI or appeal a previously submitted Pharmacy PA form.

Go

Renew a Prior Authorization request
If your patient has an approved PA and the request is about to expire in the next 90 days and would like to renew the request, click Go.

Go

You can review the list of requests that are available for renewal, or if you have a long list, you can conduct a search as we did previously. Once you find the request that you want to renew, click the *Renew* link on the right next to the EOC.

Review the initial authorization information that displays and make any necessary changes. Notice that you can edit the prescribing physician, if necessary, as well as the drug information such as the Dosage and Frequency.

Prior Authorization request details:

Patient:	JOHN_01 PETER_01	Member ID:	659931200
Eligibility Start Date:	01/01/2012	Eligibility End Date:	12/31/2999
Group Number:	8893202	DOB:	01/01/1953
Prior Auth (Eoc) ID:	51653	Site of Care:	Retail Pharmacy
Date Requested:	1/31/2013 10:19:11 AM	Date Closed:	1/31/2013 10:20:22 AM
Authorization Start Date:	01/31/2013	Authorization End Date:	03/01/2013
Benefit Type:	Pharmacy		
Status:	**Approved**		
Is this an Urgent Request?:	No	Prescriber:	Dr. Brian Smith Change/Edit

Drugs/Services requested: (Click on Drug Name/Service to view formulary alternatives.   Review/Edit the following fields and click Submit to initiate the process.)

Drug/Service Name:	AMPYRA ER 10 MG TABLET		
Quantity	60 *	Days Supply	30 *
No.of Refills	0 *	Duration	30 *
Start Date	03/02/2013		
End Date	03/31/2013 *		
Route	ORAL	New/On-going	New *

Additional Info

Is this an Urgent Request?: No

(Select Yes, if you believe that the standard review time frame may seriously jeopardize the life or health of the patient or the patients ability to regain maximum function.)

Comments:

* Required Fields   Back   Save   Submit

The authorization renewal start date defaults to the day after the original request's end date. This is not an editable field. If you need to create an authorization with a different start date that is later, you must initiate a new prior authorization request.

Add any additional comments specific to the renewal. You can also indicate if the renewal request is urgent. Click *Submit* when you are finished.

You will receive a message that you have successfully initiated a renewal. Now you will need to answer additional clinical questions, attach or fax any supporting documentation for the renewal and finally submit the request.

ExpressPAth Help and Support

ExpressPAth offers a variety of support tools on its website, which can be accessed by clicking on the *Help, Tutorial or Support* links in the upper right-hand corner of each page.

- *Help* – General user guide for all *ExpressPAth* users. This user guide is contains more detailed step-by-step instructions for the *ExpressPAth* Provider Portal, including an entire section (Section 2) dedicated to the Settings tab in *ExpressPAth*.

- *Tutorial* – Short video tutorials that are a great supplement to this Quick Start Guide to train new *ExpressPAth* users or to review specific functionality (e.g., Initiate a Prior Authorization Request, Renewals, etc.)

- *Support* – Use this link to submit a support request if you are experiencing any technical difficulties with *ExpressPAth*. The *ExpressPAth* Support Team monitors these issues daily and will get back to you (usually in less than 24 business hours) to help troubleshoot and resolve your issue

- **If you have questions about how to enter a prior authorization request in *ExpressPAth*, please email ExpressPASupport@express-scripts.com or call 1-844-583-7039**