

Checklists for Prior Authorization and Appeals

A key step in the process is to review the PA guidelines on the insurer's website for information including forms and contacts.



Prior Authorization (PA) Checklist

The checklist below highlights items and information that may be needed to obtain a PA decision from an insurer.

Completed PA request form

- Patient name and date of birth
- Insurance policy number
- Physician name and NPI number
- Physician specialty
- Date of service
- Patient diagnosis—ICD-10 code
- Product name and NDC number
- Correct quantity

Summary of patient's history

- Previous treatments/therapies
- Symptoms or conditions
- Relevant labs
- Diagnostic tests
- Current severity of the patient's condition
- Comorbidities

Include a statement of medical necessity

Sign all appropriate forms



Appeal Checklist

If the health plan denied the PA:

- Review the denial letter to understand the reasons that need to be addressed
- Pay attention to timelines for submission of appeal
- Write an appeal letter
 - Add Prescribing Information and/or FDA approval letter
- Appeal letter should be signed by physician
- Follow up with the health plan to confirm the appeal letter was received and ask about its status

If appeal is denied, consult denial letter to start next level of appeal.

Please keep track of dates and correspondence. When you speak to the insurance company, make sure you keep track of the names of people with whom you spoke.

At any step during the fulfillment process, you can turn to Madrigal Patient Support

Call 1-877-219-7770
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