

Humana Clinical Pharmacy Review

Interactive Voice Response (IVR) System User Guide

Introduction

The Humana Clinical Pharmacy Review (HCPR) interactive voice response (IVR) system, accessed by dialing **1-800-555-2546**, is designed to offer an alternative method for our provider partners to submit new requests for pharmacy authorization, check on the status of existing authorizations, and determine if an authorization is required for the specific member and drug.

The HCPR IVR is available 24 hours a day, 7 days a week with the exception of system upgrades and routine maintenance. However, IVR menu options that hand the caller off to live support personnel will only transfer during normal business hours. Our office hours are 8am to 8pm your local time, Monday through Friday. You can fax your request to 1-877-486-2621 24 hours a day 7 days a week, or call back during normal business hours. Providers calling regarding an urgent request for Medicare members can leave a message or if you are calling for Florida Medicaid members will be transferred to a live representative outside normal business hours.

The IVR interfaces with several Humana systems, to access member eligibility, drug formularies, authorizations and claims testing ability to verify successful fulfillment at point of sale.

Please note: There's a faster way to complete your prior authorization request. Humana has partnered with Cover-My-Meds to offer free electronic prior authorizations, so you no longer need to manage the process on the phone or using fax forms. This is the easiest and most efficient way for prior authorization submission. Visit go.covermymeds.com/humana to begin your prior authorization that results in a faster determination.

Required Information

To use the HCPR IVR, please have the following information available.

- Humana Member ID
- Member's date of birth
- Your National Provider Identifier (NPI)
- Your secured fax number
- Drug name, strength and quantity based on a 30-day supply

Menu Options

Upon accessing the HCPR IVR, the following options will be provided.

- For automatic routing, if the caller is a:
 - Member **Press 1**.
 - Doctor's office **Press 2**.
 - Pharmacist **Press 3**.
- To validate the member:
 - Enter the Member ID. Use the star key for any letters in the ID.
 - Enter the member's date of birth in the following format: MM/DD/YYYY
- To identify the provider:
 - Enter the 10-digit NPI.
- Choose the operation you want to perform:
 - To check the status of an existing authorization **Press 1**.
 - To request a new authorization **Press 2**.
- Verify or update your secured fax line in our records:
 - We have the following number on file (xxx-xxx-xxxx), is this correct?
 - If not, please provide your fax number.
- Identify the drug you're calling about.
 - Enter the first five letters of the drug name. **Press 1** when you hear the correct name.
 - Listen to the dosage options. **Press 1** when you hear the correct dosage.
 - Enter the quantity you want, based on a 30-day supply.
 - Drug, dosage and quantity are read back for confirmation.
- If requesting a new authorization, you may hear:
 - A prior authorization is not required for this member and drug.
 - A prior authorization is required for the following reason (xxx...). An Episode of Coverage (EOC) has been created for you with EOC ID #####. Please retain this number for your records, to check status at a later time.
 - There is already a prior authorization in our system for this member and drug. **Press 1** to hear the status.
- If you have no more inquiries, **Press 1** or hang up.
- To start a new inquiry:
 - For the same NPI but for another member **Press 2**.
 - For a different NPI **Press 3**.
 - To speak to an HCPR representative **Press 0**.