

# EMERGENCY FILLS FOR MEDICATIONS REQUIRING A PRIOR-AUTHORIZATION

If you urgently need medication requiring prior authorization during Kaiser Permanente's non-business hours, or your provider is unavailable for consultation, the pharmacy may be able to provide a one-time Emergency Fill.

Emergency Fills are appropriate in circumstances where there is an immediate therapeutic need for a prescribed medication that requires a prior-authorization due to formulary or other utilization management restrictions is present.

Immediate therapeutic needs are those where the timeframe required for prior-authorization without treatment would result in imminent emergency care, hospital admission or might seriously jeopardize the life or health of you or others in contact with you.

The Emergency Fill will be no more than the prescribed amount up to a seven day supply or the minimum packaging size available at the time the Emergency Fill is dispensed. Only the Emergency Fill dosage of the medication will be approved and paid.

If you receive an Emergency Fill, you will be responsible for your cost-share. This may include deductibles, coinsurance, copayments, and similar charges.

## EMERGENCY FILL MEDICATION LIST

The medication list for Emergency Fills to address immediate therapeutic needs is as follows (medications in addition to those listed below may be covered for Emergency Fill on a health plan by health plan basis):

- Antibiotics & Antivirals for acute infections
- Medications for mental health conditions
- Anticoagulant/Antiplatelet medication
- Antiemetics (for imminent Nausea and Vomiting)
- Anti-Rejection/Immunosuppression medication for post-transplant patients
- Antiretrovirals (excludes new starts, except for emergency use)
- Cardiovascular medications for acute treatment only (e.g. antiarrhythmics, anti-hypertensives)
- Epinephrine injections
- Generically available, immediate release pain medication (does not include transmucosal immediate release fentanyl)
- Gout flare (acute) medications
- Insulin (excludes new starts)
- Naloxone
- Non-OTC pediculocides-lice and scabies treatments
- Rescue Inhalants and delivery support devices
- Seizure/epilepsy medications
- Triptans

High dollar medications for chronic conditions, e.g. oral oncology, hepatitis C, biologics, multiple sclerosis treatments, enzyme replacements, etc. **are not consistent with the above definition of “immediate therapeutic needs” and thus would not be covered for Emergency Fill.**

**Also, an Emergency Fill will not be paid in the following situations:**

- Non-contracted pharmacy
- Quantity limitation exceeded
- Yearly maximum met

### **WHAT IS THE PROCESS FOR GETTING APPROVAL AND PAYMENT OF AN EMERGENCY FILL?**

When you present a prescription at a contracted dispensing pharmacy with an immediate therapeutic need and a corresponding prescription from their provider for a medication requiring a prior authorization that is specified on the list, the dispensing pharmacy can contact Kaiser Permanente for an override that designates the dispensed medication as an Emergency Fill and will authorize payment.