



Prior Authorization Checklist

Complete the Prior Authorization request



- Verify that you are using the correct Prior Authorization (PA) form for the patient’s insurance company. Some payers may require specific forms for specific medications.
- Check with the patient’s insurance company to determine how you will submit PA information — by phone, fax, email, health plan website, or electronic PA portal.
- Confirm that the PA form is filled out completely and accurately. PA can be denied if the form is missing information or due to clerical errors, including incomplete information about the patient or healthcare provider.
- Include any documentation requested by the patient’s insurance company.

This may include:

- Previous medications for the diagnosis
 - Patient clinical notes detailing the relevant diagnosis
 - Relevant laboratory results and dates
 - Product package insert/physician label
 - Peer-reviewed journal articles or clinical practices referencing nationally recognized guidelines
- PA requirements vary among healthcare insurers. Upon request, the Support Path® program can obtain the requirements for submitting a PA and provide that information to the healthcare provider.*

After the request is submitted



- Keep copies of everything submitted for the PA request.
- Be sure to log any updates, so you can refer to them later, if necessary.*
- If the payer requests additional documentation, provide it as quickly as possible.
- If requested, Support Path can track the PA status and keep you informed when there are updates.

*Support Path cannot submit information or paperwork to the patient’s insurance company on behalf of your office.



If the Prior Authorization request is denied



- Re-check the forms submitted for errors or missing information. Mistakes happen, and incomplete or inaccurate information can lead to PA denial.
- Support Path can provide information about the appeals process and whether an appeal is possible.*

As a provider, you are responsible for completing PA documentation and for billing third-party payers correctly, and you should determine if any payer-specific guidelines apply. The information provided here is general in nature and is not intended to be conclusive or exhaustive, nor is it intended to replace the guidance of a qualified professional advisor. Gilead, Asegua, and their agents make no guarantees regarding the timeliness or appropriateness of this information for your particular use, given the frequent changes in public and private payer billing.

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Get Your Patients Started With Support Path



Call 1-855-769-7284

Monday — Friday, 9 AM to 8 PM ET

Callers can also leave a confidential message any time and day of the week.



Enroll Your Patient Online

Enroll online at **MySupportPath.com** by completing an enrollment form today.