



ExpressPAth Quick Start Guide

Getting Started

The 1199SEIU Benefit Funds (the Benefit Funds) are partnering with Care Continuum, an Express Scripts, Inc. company, to help manage prior authorization requests from providers for certain outpatient specialty drugs covered under the medical benefit.

ExpressPAth is an online tool that is available to 1199SEIU Benefit Funds providers on October 1, 2013, to manage prior authorization requests for select specialty drugs. Providers can use ExpressPAth to:

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

The 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.
- Potential for real-time approvals. Based on how you answer the clinical questionnaire, you may receive a real-time online approval for your prior authorization request.
- Email notifications. Receive email notifications once a decision (approved or denied) is reached (if the authorization was not approved in real time) instead of checking for faxes or calling Care Continuum.
- Submit renewals or appeals online. Submit prior authorization renewals up to 90 days prior to expiration to prevent potential lapses in your patients' therapy. Request appeals online as well.

Submit prior authorization requests through ExpressPath for the following 1199SEIU members that are participating in the Express Scripts, Inc. Medical Benefit Management (ESI MBM) program:

- Wage Class I and Wage Class II members;
- Spouses and dependents with primary Fund medical benefit coverage in the 1199SEIU National Benefit Fund for Health and Human Service Employees, the 1199SEIU Greater New York Benefit Fund for New York Members and the 1199SEIU National Benefit Fund for Home Care Employees; and
- Members that are retired but are not yet Medicare Part D eligible.


The ESI MBM program does not apply to members in the 1199SEIU National Benefit Fund for Rochester-Area Members, the 1199SEIU Licensed Practical Nurses Welfare Fund, Medicare Part D eligible retired members or the 1199SEIU Greater New York Benefit Fund for New Jersey Area Members.

You can find the list of drugs that require prior authorization for 1199SEIU Benefit Funds members at www.1199SEIUBenefits.org and at <http://www.specialtybenefitservices.com/clients/1199SEIUBenefitFunds>

Access ExpressPath at: <https://www.express-path.com>

Registering for ExpressPAth

Registration for ExpressPAth is required so that Care Continuum 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.

<p>Enter your login credentials to access your account (* Required fields)</p> <p>Don't have a User Id? Click here to Register.</p> <p>Enter your User ID: <input type="text"/> *</p> <p>Forgot your User Id?</p> <p>Enter your password: <input type="password"/> *</p> <p>Forgot your password?</p> <p>Enter the below text: <input type="text"/> *</p> <p></p> <p><input type="button" value="Sign in"/></p> <p><small>If you are a Prescriber/Provider and have not faxed the license during the registration process, please click here to download a copy of the fax cover sheet and fax it along with your license to 317-348-8888.</small></p>	<p>Prior Authorization Portal for Providers.</p> <p>Initiate a New Prior Authorization Request</p> <p>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.</p> <p>Complete Existing Prior Authorization requests</p> <p>Complete existing Prior Authorization requests that were initiated by you or the insurance plan and require your input.</p> <p>Search for a previously submitted PA request</p> <p>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.</p> <p>Renew a Prior Authorization request</p> <p>Renew your patient's approved Prior Authorization(PA) request, which is about to expire in next 90 days.</p>
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Step 1: Prescriber or Providing Facility Registration

A facility administrator will need to have the following information available to register each *prescriber* (physician, physician assistant, nurse practitioner, pharmacist) or *providing facility* (physician's office, home infusion therapy provider, outpatient facility, specialty pharmacy or dialysis center):

- National Provider Identifier (NPI)
- Work email address of the facility administrator
- A copy of the prescriber or providing facility's state license – they will need to either upload this file or use a fax cover sheet to fax it to Care Continuum for validation of their credentials.

The facility administrator will receive an email that the prescriber/providing facility's account has been activated (within two business days) once Care Continuum has received a legible copy of the state license and validated credentials.

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 administrator receives the activation email from

the ExpressPath team, 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 email address

The Agent will need to select the type of the facility that they work at from the *I work at a* dropdown. Next, they will enter the prescriber or providing facility NPI and click *Search*. Details about the facility or prescriber will appear in a pop-up box. Click on the hyperlink of the prescriber or facility name to proceed. Click *Add Another* and repeat the steps to search for another NPI (up to ten times) to associate to additional NPIs. Click *Next* once all NPIs have been associated.

Step 3 : License Information & Upload License * Required fields

I am a: *

I work at a: *

Search for an existing home infusion therapy agency

NPI: *

OR

First Name: *

Last Name: *

OR

Facility Name: *

OR

PPI Number: *

NOTE: At this time, a maximum of ten 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 the Agent has completed the remainder of the registration process, the facility administrator will receive an email requesting that they click a link to go into ExpressPath to assign privileges (e.g., *Initiate a PA, Check Status of a PA, etc.*) and activate the Agent. Once the facility administrator has completed this final step, the Agent will receive an email that they have been activated by that prescriber or facility. At that point, the Agent (with appropriate privileges) can begin managing prior authorization requests using ExpressPath on behalf of that prescriber or providing facility.

Initiate a Prior Authorization Request

To begin creating an Episode of Coverage (EOC) – the term for a single authorization request in ExpressPath – from the homepage, 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.	<input type="button" value="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.	<input type="button" value="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.	<input type="button" value="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.	<input type="button" value="Go"/>

Step 1: Search for Patient

Choose "1199SEIU" 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*.

Home Initiate a Prior Authorization (PA) Request.		Welcome Amy Ruiz		
Drug/Service:	Patient:	Benefit Type:	Prescriber:	Provider:
1 Search For Patient 2 Select Patient 3 Search For Drugs/Services 4 Step Therapy Alternatives 5 Additional Information 6 Select a Site of Care 7 Verify Prescribing Physician	Step 1 : Search For Patient			
	Select Insurance and Search by Member ID or First Name, Last Name and DOB			
	Select Insurance:	<input type="text" value="Client A"/> *		
	AND			
	Search By Member ID or Last Name, First Name and DOB (Click on Clear button to clear the data, Click on Search button to search based on the provided details)			
	Member ID:	<input type="text"/> *		
	OR			
Last Name:	<input type="text"/> *			
First Name:	<input type="text"/> *			
Date of Birth:	<input type="text"/> <input type="button" value="Calendar"/> *			
(* Required Fields)				
<input type="button" value="Clear"/> <input type="button" value="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*.

The screenshot shows the 'Step 3: Search and select drugs or ancillary services' interface. At the top, there is a yellow header with the text 'Selected Drug/Service List (Click on 'Add' to add Drug/Service.)' and 'No Drug/Service selected'. Below this is a blue button labeled 'Add drug/service'. The main search area is divided into two sections. The first section, 'Search for Drug by NDC, Drug Name or HCPCS/CPT Code', contains three input fields: 'NDC:', 'Drug Name:' (with 'Remicade' entered), and 'HCPCS/CPT code:'. A red 'Search' button is positioned to the right of these fields. The second section, 'Search for services.', contains a dropdown menu for 'Select a Service:' and a blue 'Add' button. At the bottom of the form, there is a red error message: '^ At least one field is required to perform a search for a drug or service'. Navigation buttons for 'Save', 'Back', and 'Next' are located at the bottom right.

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. If ten calendar days have passed, you will need to initiate a new prior authorization request.*

Step 4: Step Therapy Alternatives

ExpressPath will automatically skip this step if there are no step therapy alternatives for the drug you selected. If there are alternatives, you will be given the option to select the alternative drug instead.

Step 5: Additional Information

You will need to enter the following physician's order information in ExpressPath:

- *Dosage, Frequency, 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 (e.g., retail pharmacy, provider’s office, etc.).

Step 7: Verify Prescribing Physician

If you are an Agent of an individual prescriber, choose the prescriber from the dropdown menu. If you are an Agent of a providing facility, you will need to click the *Search Prescriber* link to search for any prescriber in the CMS database or the *Add Prescriber* link to manually add the prescriber details. Click the *Next* button when you are finished.

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/or manually add their information instead.

Step 9: Complete Questionnaire

As you begin to answer the questions to the clinical questionnaire, future questions that are no longer relevant will become disabled. If you need to print the questions to show or fax the prescriber in order to receive further clarification, click the *Print* hyperlink to print a PDF document (all of the answers that you have already answered will be populated) and then click *Save* to save the request and 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 Care Continuum 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 it. 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 "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 the State of New York's required turnaround times. Click *OK* to remove the pop-up message from the screen.

NOTE: *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 once it is made.*

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.

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 Authorization (EOC) ID or the patient's first and last name or member ID in order to narrow down your search results.

The screenshot shows the Express Scripts web application interface for searching prior authorization requests. At the top, there is a navigation bar with the Express Scripts logo, a 'Home' link, and buttons for 'Prior Authorization', 'Settings', and 'Logout'. Below the navigation bar, the main heading reads 'Search for a previously submitted Prior Authorization request'. The interface is divided into a left sidebar and a main content area. The sidebar contains three numbered steps: '1 Enter Search Criteria', '2 View Search Results', and '3 View Details'. The main content area is titled 'Step 1: Enter Search Criteria and Click Search' and contains several input fields: 'First Name', 'Last Name', 'Date of Birth', 'Member ID', 'Group Number', 'Physician' (a dropdown menu with '<--Select-->' selected), 'Prior Auth (EOC) ID', 'External Case Number', and 'Prior Authorization Start Date Between' (with 'And' and a second date field). A red error message at the bottom left of the form states '^ At least one value is required'. At the bottom right, there are 'Clear' and 'Search' buttons.

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 authorization 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* –Indicates that the authorization is being reviewed by Care Continuum. Once a decision has been reached, a status of either “Approved” or “Denied” will display.
- *Your Input Required* –Indicates that the prior authorization request requires more information from you before a decision can be reached.

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

If an authorization has a status of “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 (or those that are 90 days or less past their expiration date) with a status of "Approved."
- *Withdraw* – When a prior authorization request shows a status of "In Progress," you 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* – Used to update the NPI of the provider on a prior authorization that had been submitted (if the provider in ExpressPAth does not match the provider on the claim).

NOTE: *You will only see prior authorizations (EOC's) that are associated to your prescriber or providing facility 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 (or those that are 90 days or less past their expiration date) by clicking on the *Renew a Prior Authorization request* link on the homepage. 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.	<input type="button" value="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.	<input type="button" value="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.	<input type="button" value="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.	<input type="button" value="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 or the provider, if necessary, as well as the drug information, such as the *Dosage* and *Frequency*.

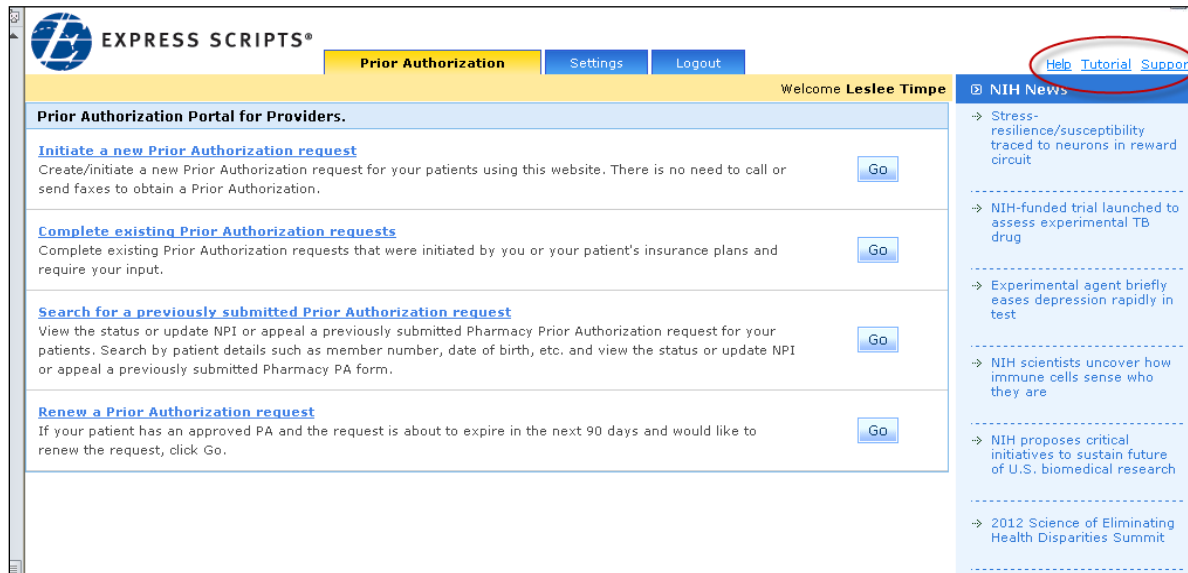
The authorization renewal start date defaults to the day after the original request's end date. This is not an editable field. If you need to create an authorization with a different start date that is later, you must initiate a new prior authorization request.

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 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 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., Agent Registration, 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 ExpressPath, you can also call (877)273-2122 and select Option 2 to speak with our ExpressPath Provider Portal Specialist.

Access ExpressPath at: <https://www.express-path.com>