AcariaHealth™
Specialty Pharmacy

Available Drug List

Allergy and Immunology

Asthma
Cinqair^
Dupixent
Exdensur*^
Fasenra*
Nucala
Tezspire
Xolair*

Immune Deficiencies & Related Disorders
Alyglo^
Asceniv IV^
Cutaquig^
Cuvitru^
GamaSTAN S/D
Gammagard Liquid ERC^
Gammagard^
Gammagard S/D^ *(Discontinuing 12/2027)*
Gamunex-C^
Hizentra*^
HyQvia^
Octagam^
Panzyga^
Privigen^
Qivigy*
Xembify^

Other
Firazyr
Icatibant
Rhapsido
Rinvoq

Transforming Lives with Compassionate Care

If you are seeking a drug that is not listed, please contact your Account Executive.

* Limited Distribution Drug Access ^ Infusion/Injection Drug Available

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AcariaHealth.com
Phone: 800.511.5144 | **Fax:** 877.541.1503

Prescription Submission - Steps for Success

We are committed to providing quality care to your patients. Our specialty pharmacy utilizes ePrescribing to ensure an efficient and accurate submission process, and accepts referrals via phone call and fax. Please take the following steps to submit a prescription:

Step One: Collect All Patient Records

Patient Demographic Sheet

- Preferred and alternate method of communication
- Preferred language
- HIPAA authorizations

Insurance Coverage Details

- Front and back copy of insurance card
- If Medicare patient, include copy of Part D card

Clinical Notes

- All ICD-10 codes and latest chart notes signed by physician
- Current medication list (include dose and if in combination with another)
- Past and failed medication list (include dose and duration)
- Drug allergies

Step Two: Select Your Preferred Submission Method

ePrescribe

- Find AcariaHealth in your electronic medical record (EMR) system
- List drug name, strength, and dosage
- Include prescription date, quantity prescribed, and number of refills
- Indicate if this is the first dose and if there is a loading/starting dose
- Attach all collected patient records to submission

Phone Call

- Dial **800.511.5144** to speak directly to our pharmacists
- State drug name, strength, and dosage
- Include prescription date, quantity prescribed, and number of refills
- Indicate if this is the first dose and if there is a loading/starting dose
- Send all collected patient records via fax to 877.541.1503

Fax

- Download and complete the appropriate referral form on our website
- Send completed referral form and all collected patient records via fax to **877.541.1503**

Download our referral forms:
ahrx.co/AH-referrals

Step Three: Let Us Help You With The Rest

Financial Coverage

- Please complete and send all insurance paperwork to us via fax to 877.541.1503. Do not submit any information to the patient's insurance directly — we will submit on the patient's behalf. If copay assistance is needed, we will find copay cards, foundations, and pharmaceutical programs to help obtain the lowest copay possible. There are times when it is necessary to get the patient's approval to do this on their behalf. In some instances, patients are required to submit requests themselves due to necessary income eligibility requirements and other sensitive personal information.

Prior Authorization

- We can assist with prior authorization for most insurance plans. Once obtained, we will complete and send to you for a prescriber signature. If an order must be filled by a different contracted pharmacy, we will triage the prescription and keep you informed via fax or email. If you receive a denial letter from the patient's insurance, please fax it to AcariaHealth at 877.541.1503. We will review and draft an appeal letter for the provider.*

Medication Delivery

- Upon approval of prior authorization, we will notify you via fax or phone call. We will contact the patient to schedule delivery at no charge and will deliver to their home or your office, as requested by you. Patients will receive a welcome kit on their first delivery that guides them through the process of getting started with our pharmacy. Refills can be processed through the online patient portal or text service program.

*AcariaHealth cannot write an appeal letter for Centene owned companies.