#### **Prime Therapeutics Management**

#### **Prior Authorization Call Center and Automated Voice Response System**

#### On Behalf of Arkansas Medicaid

### 800-424-7895

## Speak 'Member'

If you are a **BENEFICIARY** 

# State one of the following options as a reason for your call:

'PA Status'
'New Prior Authorization'
'Eligibility Status'
'Refill request'
'Denied prescription'
'Something else'

When calling, please have the Member's Medicaid ID, DOB, and Zip Code.

### Speak 'Prescriber'

If you are calling from a **PRESCRIBER'S OFFICE** 

# State the Medicaid ID number.

# State one of the following options as a reason for your call:

'Preferred Drug List'
'PA Status'
'New Prior Authorization'
'Eligibility Status'
'Refill request'
'Denied prescription'
'Web Support'
'Something else'

When calling, please have the Prescriber's Medicaid ID, Member's Medicaid ID, and DOB.

## Speak 'Pharmacy'

If you are calling from a **PHARMACY** 

State the NPI number.

# State one of the following options as a reason for your call:

'Preferred Drug List'
'Rejected Claim'
'Claim Inquiry'
'Web Support'
'Member Billing' 'PA
Status'
'Something else'

When calling, please have the Pharmacy's NPI, Prescription Number, Member's Medicaid ID, and DOB.

The Pharmacy Call Center is available from 8am to 5pm Monday through Friday, excluding state holidays. An after-hours voicemail option is available.