Requesting a Re-determination

If your first request for a drug is not approved, you can ask for that decision to be looked at again. This is called an appeal. You must ask for an appeal within 65 days. If you need more than 65 days we can give you more time. You must have a good reason for missing the deadline. You may ask for a drug that is not on our list of covered drugs if you think you need it. You can ask for an exception if you think a rule does not apply to you. You can ask for an exception to the limit of how much medicine you can get. You can ask for an exception if you think you do not need a special okay to get a drug (prior tiering exception). Your prescriber must give a statement to support this. You or your prescriber can ask for a faster appeal (expedited). You can also ask for a standard appeal. To ask for an appeal, please call the Member Services number on your Molina Healthcare, Senior Whole Health of New York, Passport Advantage by Molina Healthcare, My Choice Wisconsin, ConnectiCare, or Central Health Medicare Plan card. You can mail your appeal to 7050 Union Park Center, Suite 600, Midvale, Utah 84074. Please include your name, address, Member ID number, the reasons for appealing, and any proof you wish to attach. If your appeal is for a drug that is not covered, your prescriber must show why a covered drug would not be as good to treat your health problem. Molina Healthcare, SWH of NY, Passport, My Choice Wisconsin, ConnectiCare, or CHMP will look at your case again and decide. If any of the drugs you requested are still not approved you can ask for a third review of your case by a reviewer outside of Molina Healthcare, SWH of NY, Passport, My Choice Wisconsin, ConnectiCare, or CHMP (independent review). If you do not agree, you will have the right to appeal again. You will get more notice of your appeal rights if this happens.

Notice of Availability (NOA)