PAXpress User Manual

v1.0



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Preface

Purpose and Scope

PAXpress® is designed for providers to request a prior authorization (PA) from New York State Medicaid. This manual is designed specifically for providers to explain the following steps in using the PAXpress application:

- Logging in
- Requesting a Pharmacy PA
- Requesting a Practitioner Administered Drug (PAD) PA
- Understanding the PA request results

Each section includes screenshots, field definitions, and instructions on how to perform the various tasks.

Document Conventions

- The terms "you" and "user" in this document refer to the PAXpress users.
- Menus, menu options, tabs, fields, drop-down list options, buttons, links, sections, and page names appear in **bold** font.
- A Note, representing additional information related to a topic or concept, is presented in the following style:



This is a note.

Audience

This user manual is intended for New York State (NYS) Medicaid-enrolled prescribers.

Application Requirements

The New York State Department of Health (NYS DOH) requires that all providers have an active account with the electronic Provider Assisted Claim Entry System (ePACES), a component of the electronic Medicaid system of New York, eMedNY.



An Electronic Transmitter Identification Number (ETIN) must be obtained prior to enrollment.

The requirements for using ePACES and PAXpress include:

 An internet browser supporting 128-bit encryption with JavaScript and cookies enabled – Microsoft Edge, Firefox, Chrome, or Safari.





• Operating systems – Microsoft Windows, Mac OS, or Linux

To take advantage of ePACES, providers need to follow an enrollment process. Additional enrollment information is available at <u>www.emedny.org</u> or by selecting this link:

https://www.emedny.org/HIPAA/QuickRefDocs/ePACES-Enrollment Overview.pdf

Resources

For questions pertaining to PAXpress application functionality or ePACES enrollment, call the eMedNY Call Center at 1-800-343-9000.

For questions related to clinical criteria parameters and requirements for drugs subject to prior authorization, call the NYRx Pharmacy Prior Authorization Call Center at 1-877-309-9493.





Chapter 1 – Accessing the PAXpress Application

To access the application:

- 1. Go to <u>www.emedny.org</u>.
- 2. Select PAXpress® from the list on the right side of the page:



Figure 1. eMedNY Site



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Additionally, you can access PAXpress by using the following links:

- <u>https://newyork.fhsc.com</u> Select the **PAXpress** link from the **Quick Links** menu tab.
- <u>https://epaces.emedny.org/</u>
- <u>https://paxpress.nypa.hidinc.com</u>

The PAXpress home page opens:

PAXPRESS [™]		- Login
Home New Request		
Pharmacy		
NYRx Pharmacy Programs	New Announcement By ADMIN on 03/18/2024	
NYRx Preferred Drug List (Outpatient)	This is a test. I would like to see now it snows in the annoucement region, yes . This is the second row.	
NYRx, Medicaid Pharmacy List of Reimbursable Drugs		
eMedNY		
NYRx Education and Outreach		
Practitioner Administered		
Practitioner Administered Drug Search Tool		
Practitioner Administered Drug Policies and Billing		
General Information		
Drug Utilization Review Program		
Important Provider Communications		
Medicaid Update		
PAXpress User Manual		
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Figure 2. PAXpress Home Page

This page contains four sections:

- **Pharmacy**: this section contains links to pharmacy sites of interest for providers.
- **Practitioner Administered**: this section contains links to commonly used practitioner administered sites.
- **General Information**: this section contains important general information links like Medicaid updates and provider communications.
- **Announcement**: this section displays announcements related to the PAXpress application, such as program modifications and additions of new criteria.





To login to PAXpress:

1. Select Login or New Request.

The Login page opens:

PAXPRESS [™]		- Login
Home New Request		
Pharmacy	Login	
NYRx Pharmacy Programs	To access PAXpress log in with your ePACES account. Information about ePACES can be found HERE	
NYRx Preferred Drug List (Outpatient)	8. Username	
NYRx, Medicaid Pharmacy List of Reimbursable Drugs	S. Password	
eMedNY	Remember insersome	
NYRx Education and Outreach	I have read and I agree to the Medicaid Confidentiality Regulations	
Practitioner Administered	Sign In	
Practitioner Administered Drug Search Tool		
Practitioner Administered Drug Policies and Billing		
General Information		
Drug Utilization Review Program		
Important Provider Communications		
Medicaid Update		
PAXpress User Manual		

Figure 3. Login Page

2. Enter your ePACES User ID in the **Username** field and your password in the **Password** field. Only ePACES User IDs that are attached to a prescribing provider can be used to enter prior authorization requests via PAXpress.

If you need additional help or information regarding ePACES, select the **HERE** link above the login fields.

3. Select the checkbox to indicate adherence to Medicaid confidentiality regulations.

₽	The Medicaid confidentiality checkbox must be selected before
_	signing in. PAXpress will retain the username if this checkbox is
	not selected; however, the password must be re-entered.
	Contact the eMedNY Call Center at 800-343-9000 if you
	encounter trouble logging into the PAXpress system.

4. Select Sign In.

The Search for Client page opens.





Chapter 2 – Searching for Clients

Prior to submitting a Pharmacy PA or PAD Request, you must first search for the client in PAXpress. The sections below outline the pages you will use when searching for clients. Please refer to them for more page-specific details.

2.1 Search for Client Page

The Search for Client page allows you to search the system for existing clients.

PAXPRESS [™]		R aabbas ∽
Home New Request		
Pharmacy		
NYRx Pharmacy Programs	Search for Client	Instructions
NYRx Preferred Drug List (Outpatient)	Client ID	Please enter the Medicaid Client Identification Number (CIN), first four
NYRx, Medicaid Pharmacy List of Reimbursable Drugs	Client Last Name	letters of the last name and the client's date of birth and click search.
eMedNY		You can click the reset
NYRx Education and Outreach	Client DOB	button to clear the search fields
Practitioner Administered		
Practitioner Administered Drug Search Tool	Reset Search	
Practitioner Administered Drug Policies and Billing		
General Information		
Drug Utilization Review Program	T a 2024 Augustus Haulit. All sinche annund	
Income advente Description	S 2024 Acentra mealth. All rights reserved.	

Figure 4. Search for Client Page

All fields marked with an asterisk (*) are required. If any of the required fields are left blank, fail field validations, or do not match the system information found for the client, error messages display as shown in this example:





PAXPRESS [™]		3 errors have occurred
Home New Request		Client ID is required Client Last Name is required
Pharmacy		<u>Client DOB Required</u>
NYRx Pharmacy Programs	Search for Client	Instructions
NYRx Preferred Drug List (Outpatient)	Client ID	Please enter the Medicaid Client Identification
NYRx, Medicaid Pharmacy List of Reimbursable Drugs	Client Last Name	letters of the last name and the client's date of birth and click search.
eMedNY	First 4 characters or full last name if less than 4 characters	You can click the recet
NYRx Education and Outreach	Client Last Name is required	button to clear the search fields
Practitioner Administered	(MM/DD/YYY)	
Practitioner Administered Drug Search Tool		
Practitioner Administered Drug Policies and Billing	Reset	
General Information		
Drug Utilization Review Program		

Figure 5. Search for Client Page - Errors

2.1.1 Fields and Buttons

Table 1 lists the fields or buttons on the page and how to complete them.

Field or Button	Description	
Client ID	Enter the Client Identification Number (CIN) found on the client's Medicaid card in the following format: AA12345A (Two alpha + five numeric + one alpha)	
Client Last Name	Enter either the first four alpha characters or the full last name of the client if less than four characters.	
Client DOB	Enter the date of birth of the client in MM/DD/YYYY format or select a specific date from the date selection picker. A drop-down list for the month and year will be available for selection.	
Reset	This button clears all previously entered search criteria.	
Search	Once selected, the system validates the search criteria and determines if there is a matching client in the system.	

Table 1. Fields and Buttons – Search for Client Page





2.2 Client Search Results

A valid client must be found in order to create a PA. Errors will display if any of the required fields are entered incorrectly.

If the client is found, you will see the returned search record with the client's name, CIN, date of birth, and gender, along with the PA request buttons:



Figure 6. Returned Client Record

If a client has existing PAD PAs with a current status of "Approved", you will see them listed below the client details, as shown in Figure 7. Please note that this table only includes PAD PAs obtained via PAXpress.



Figure 7. PAXpress Approved PAD PAs





If the system does not find a match, you will receive a "Client Not Found" error:

PAXPRESS [™]			
Home New Request			
Pharmacy			
NYRx Pharmacy Programs	Client Not Found		Instructions
NYRx Preferred Drug List	Please check the entered data a	and try again.	Please enter the Medicaid
(Outpatient) NYRx, Medicaid Pharmacy List of Reimbursable Drugs	Search for Client		Number (CIN), first four letters of the last name and the client's date of
eMedNY	Client ID		You can click the reset
NYRx Education and Outreach	Client Last Name		button to clear the search fields
Practitioner Administered	First 4 characters or full last name	e if less than 4 characters	
Practitioner Administered Drug Search Tool	Client DOB (MM/DD/YYYY)	Ĩ	
Practitioner Administered Drug Policies and Billing		Reset	

Figure 8. Client Not Found Error

2.2.1 Fields and Buttons

Table 2 lists the fields or buttons on the page and how to complete them.

Field or Button	Description		
New Client Search	This button returns you to the PA Request Client Information page so you can start a new search.		
Pharmacy PA	This button opens the Pharmacy PA Request page.		
PAD-PA	This button opens the PA Details section for a Physician Administered Drug (PAD) Request.		

Table 2. Fields and Buttons – Client Search Results





Chapter 3 – Creating a Pharmacy PA Request

Pharmacy PAs are created for medications covered under the pharmacy benefit and are processed by a Medicaid-enrolled pharmacy.

To start a new Pharmacy PA Request:

1. Select **New Request** at the top of the home page.

The Search for Client page opens.

- 2. Complete the required fields and select **Search** to search for an existing client. Refer to *Chapter 2 Searching for Clients* for more information if needed.
- 3. When the existing client is found, select **Pharmacy PA**.

The Pharmacy PA Request page opens.

4. Complete the required fields about the prescription. When finished, select **Request PA**.

You will see the PA Request dialog confirming the information you entered is correct.

5. After reviewing the details, select **Confirm** in the dialog.

The request is submitted, and you will see an approval or denial.

The sections below outline the pages you will use during the Pharmacy PA Request process. Please refer to them for more page-specific details.

3.1 Pharmacy PA Request

After PAXpress successfully validates the entered client information, select **Pharmacy PA**. The **Pharmacy PA Request** page displays:





PAXPRESS [™]				R aabbas ∨
Home New Request				
Pharmacy				
NYRx Pharmacy Programs	Pharmacy PA Request			Instructions
NYRx Preferred Drug List (Outpatient)			New Client Search	Please enter all of the information needed to submit a PA Request and
NYRx, Medicaid Pharmacy List of Reimbursable Drugs	100000000000000000000000000000000000000			click Request PA button.
eMedNY	,			clear out all of the fields
NYRx Education and Outreach	Prescriber	~		If you would like to start over and search for a new
Practitioner Administered	Drug	~		client then click the New Search button
Practitioner Administered Drug Search Tool	Please select a drug to view additional alternatives			
Practitioner Administered Drug Policies and Billing	Instructions for units of use products (inhalers, topicals, injectables, etc.)			
General Information	 Please enter the appropriate package size (or mult Please calculate the proper days supply based on o Incorrect information in the Quantity or Days Supp 	iples of) in the Qu quantity per fill ar ply fields may lead	uantity field. nd directions for use. d to denial of PA	
Drug Utilization Review Program	Days Supply (Single Fill)			
Important Provider Communications	Park		Paget Page PA	
Medicaid Update	Datk		Request PA	

Figure 9. Pharmacy PA Request Page

All fields marked with an asterisk (*) must be populated or an error will occur.

3.1.1 Fields and Buttons

Table 3 lists the fields or buttons on the page and how to complete them.

Field or Button	Description
New Client Search	Selecting this button initiates a new client search.
Prescriber	This drop-down list displays all prescribers associated to the logged in user. List entries are displayed in the following format: Prescriber Full Name [Prescriber NPI].
	Select the arrow to view the drop-down list and use the up and down arrow keys to navigate. Then, select the appropriate prescriber.
	Note: If the desired prescriber is not found, enroll the prescriber in ePACES with the ETIN that is currently enrolled with the User ID.
Drug	This drop-down list displays a list of drug names in alphabetical order. Select the arrow to view the drop-down list. Type at least the first three

Table 3	3. Fields	and Butto	ns – Phar	macv PA	Request	Page





Field or Button	Description
	characters of the drug name. For example, typing "oxy" in the search field generates a list of drug names that begin with "oxy." Select the appropriate drug from the list.
	If applicable, the Therapeutic Equivalent Drugs list will be populated with a list of all associated Label Names for the Generic Code Number(s) of the Label Name entered in the Drug field. You have the option to select one of the values in the Therapeutic Equivalent Drugs list, which will replace the value of the previously selected Label Name in the Drug field.
Therapeutic Equivalent Drugs	This drop-down list displays only when applicable to the Drug you select. This list will be populated with all associated Label Names for the Generic Code Number(s) of the Label Name entered in the Drug field. You have the option to select one of the values from the Therapeutic Equivalent Drugs list, which will replace the value of the previously selected Label Name in the Drug field.
Quantity (Single Fill)	Enter the quantity requested for a single fill.(emedny.org/info/formfile.aspx)
Days Supply (Single Fill)	Enter the number of days' supply requested for a single fill. Be sure you calculate the correct number of days based on the Quantity you enter.
Back	Selecting this button returns you to the Client Search Results page.
Reset	Selecting this button clears all previously entered information on the page. The client information is still retained by the application.
Request PA	Once all required fields have been completed, select this button.

3.2 PA Request Dialog

Once you enter and request the Pharmacy PA, a dialog message displays for you to confirm the information entered is correct:



Figure 10. PA Request Dialog – Cancel or Confirm

Select **Cancel** or **Confirm** accordingly.





If you do not enter the required information and try to submit the request, you will receive an error:



Figure 11. PA Request Dialog – Failed Validation

Close the **PA Request** dialog and ensure you have entered all the required fields.





Chapter 4 – Creating a PAD Request

A PAD PA is created for medications covered under the medical benefit and administered by a practitioner.

To start a new PAD Request:

1. Select **New Request** at the top of the home page.

The Search for Client page opens.

- 2. Complete the required fields and select **Search** to search for an existing client. Refer to *Chapter 2 Searching for Clients* for more information if needed.
- 3. When the existing client is found, select PAD-PA.

The Practitioner Administered Drug (PAD) PA Request page opens.

4. Complete the required fields about the prescription. When finished, select **Request PA**.

You will see the **PA Request** dialog confirming the information you entered is correct.

5. After reviewing the details, select **Confirm** in the dialog.

The request is submitted, and you will see an approval or denial.

4.1 PAD PA Request Page

After PAXpress successfully validates the entered client information, select **PAD-PA**. The **Practitioner Administered Drug (PAD) PA Request** page displays:





PAXPRESS [™]		R aabbas ∨
Home New Request		
Pharmacy		
NYRx Pharmacy Programs	Practitioner Administered Drug (PAD) PA Request	Instructions
NYRx Preferred Drug List (Outpatient)	New Client Search	Please enter all of the information needed to submit a PAD Request and
NYRx, Medicaid Pharmacy List of Reimbursable Drugs		click Request PA button.
eMedNY	,	clear out all of the fields
NYRx Education and Outreach	Prescriber 🗸	If you would like to start over and search for a new
Practitioner Administered	Drug	client then click the New Search button
Practitioner Administered Drug Search Tool	Quantity (Single Fill)	
Practitioner Administered Drug Policies and Billing	Instructions for units of use products (inhalers, topicals, injectables, etc.) Please enter the appropriate package size (or multiples of) in the Quantity field. Please calculate the proper days supply based on quantity per fill and directions for use	
General Information	Incorrect information in the Quantity or Days Supply fields may lead to denial of PA	
Drug Utilization Review Program	Days Supply (Single Fill)	
Important Provider Communications	Date of PA Request	
Medicaid Update		
PAXpress User Manual	Back Request PA	

Figure 12. PAD PA Request Page

4.1.1 Fields and Buttons

Table 3 lists the fields or buttons on the page and how to complete them.

Field or Button	Description
New Client Search	Selecting this button initiates a new client search.
Prescriber	This drop-down list displays all prescribers associated to the logged in user. List entries are displayed in the following format: Prescriber Full Name [Prescriber NPI].
	Select the arrow to view the drop-down list and use the up and down arrow keys to navigate. Then, select the appropriate prescriber.
	Note: If the desired prescriber is not found, enroll the prescriber in ePACES with the ETIN that is currently enrolled with the User ID.
Drug	This drop-down list displays a list of drug names in alphabetical order. Select the arrow to view the drop-down list. Type at least the first three characters of the drug name. For example, typing "oxy" in the search field

Table 4. Fields and Buttons – PAD PA Request Page





Field or Button	Description
	generates a list of drug names that begin with "oxy." Select the appropriate drug from the list.
	After selecting the drug, you will see additional view-only fields: Drug Strength and Package Size and Billing Unit Type .
	If applicable, the Therapeutic Equivalent Drugs list will be populated with a list of all associated Label Names for the Generic Code Number(s) of the Label Name entered in the Drug field. You have the option to select one of the values in the Therapeutic Equivalent Drugs list, which will replace the value of the previously selected Label Name in the Drug field.
Therapeutic Equivalent Drugs	This drop-down list displays only when applicable to the drug you select. This list will be populated with all associated Label Names for the Generic Code Number(s) of the Label Name entered in the Drug field. You have the option to select one of the values from the Therapeutic Equivalent Drugs list, which will replace the drug you selected in the Drug field.
Quantity (Single Fill)	Enter the quantity requested per single administration. For additional information please visit the Practitioner Administered Drug Seach Tool (<u>https://www.emedny.org/info/pad/</u>)
Days Supply (Single Fill)	Enter the number of days' supply requested for a single fill.
Date of PA Request	Enter the date of the PA request. This cannot be a future date.
Back	Selecting this button returns you to the Client Search Results page.
Reset	Selecting this button clears all previously entered information on the page. The client information is still retained by the application.
Request PA	Once all required fields have been completed, select this button.

4.2 PA Request Dialog

Refer to section 3.2 for details.





Chapter 5 – PA Creation Results

PAXpress performs a validation check to ensure the requested drug requires a prior authorization. There are four possible outcomes, detailed in the sections below:

- Request Approved PA was required but all required criteria was found in member's medical claim history
- Existing Open PA
- PA Not Required
- Request Not Approved PA is required but required criteria is not found in member's medical claim history

In addition, new PAs for the current client may be requested from any of the four results using the **New Request for Client** button that appears in the client information box. PAXpress will return to the **Client Search Results** (see Section 2.2) with the current client's information already populated.

The results displays the following details:

- Drug
- Total PA quantity approved
- Service dates
- Quantity (single fill)
- Result (approval or denial)
- A response message related to the result type
- PA number
- PA start date and end date
- Rejection reason(s) (for denied, duplicate, and non-required PAs only)





5.1 Approved PA Results

If the prior authorization request is approved, you will receive an approval message in the **Results** section:

		New Client Search	New Request for Client
Results			
TOVIAZ ER 4 MG TA Service Dates from	BLET for 180.000 09/23/2024 thro) unit(s). ugh 03/22/2025.	
Quantity (Sing	Drug TOVIAZ E Ile Fill) 30.000 Result Request A	R 4 MG TABLET Approved - Certified	
The drug being re	equested has bee	n approved.	
Approved PA info recognized at tim	ormation will be e le of claim submi	electronically attached to ssion.	o the members file and
PA N	umber 21213939	940	

Figure 13. Results – Approved Pharmacy PA Request

For an approved Pharmacy PA, the Prescriber may advise clients that the drug has been approved for fill at a Medicaid-enrolled pharmacy of their choice.





9		New Client Search New Request for C	lient
esults			
AVSOLA 100 MG VIAL for 2	24.000 unit(s).		
Service Dates from 11/15/	2024 through 05/14/2025.		
Drug	AVSOLA 100 MG VIAL		
Quantity (Single Fill)	4.000		
Result	Request Approved - Certified		
The drug being requeste	d has been approved.		
Approved PA informatio	n will be electronically attach	ed to the members file and recognized at	
time of claim submissior	L		
PA Number	31213940023		
DA CHILL DI LL	11/15/2024		
PA Start Date			

Figure 14. Results – Approved PAD PA Request





5.2 Existing Open PA

If the prior authorization request already exists or is a duplicate PA for the drug being requested for the client, the **Rejection Reason(s)** in the **Results** section will show "Existing open PA":



Figure 15. Results – Existing Open PA

5.3 PA Not Required

If the drug does not require a prior authorization, the **Rejection Reason(s)** in the **Results** section will show "Drug does not require a prior authorization." You will also see a link to the New York State Medicaid Pharmacy Prior Authorization Program if you need any additional information or assistance.





PAXPRESS [™]	
Home New Request	
Pharmacy	
NYRx Pharmacy Programs NYRx Preferred Drug List (Outpatient)	New Client Search New Request for Client
NYRx, Medicaid Pharmacy List of Reimbursable Drugs	Results
eMedNY	
NYRx Education and Outreach	additional information is required, please refer to the New York State Medicaid Pharmacy Prior Authorization Program at <u>https://newyork.fhsc.com/</u>
Practitioner Administered	Drug LISINOPRIL 20 MG TABLET
Practitioner Administered Drug Search Tool	Result Request Not Required Rejection Reason(s) Drug does not require a prior authorization.

Figure 16. Results – PA Not Required

5.4 Request Not Approved – Not Certified

If the prior authorization request is denied, the **Rejection Reason(s)** in the **Results** section will show the reasons and failure codes like in the example in Figure 17. You will also see a message providing additional resources for assistance like the link to the NYRx Preferred Drug List and a phone number for the call center.



Figure 17. Results - Request Not Approved - Not Certified





When a Pharmacy PA request is denied, users can modify the submitted request by selecting **Modify Request for Client**.

5.4.1 Modify Request

The **Modify Request for Client** button will only display if the Pharmacy PA request was denied with any one of the following rejection codes, or if any one of the following rejection codes is used in conjunction with other rejection codes:

- 75UD Units Per Day or Days Supply Criteria Failure
- 75MQ Maximum Quantity Criteria Failure
- 75MD Duration Criteria Failure
- 75UF Units Per Fill or Units Per 30 Days Criteria Failure

The **Modify Request for Client** button will not display for other rejection reasons such as "Step Therapy Or Preferred Product Required (75AT)" or "Units Per Day Alt2 – use higher strength (75A2)."

If the request can be modified, as shown in the example in <>, select **Modify Request for Client**.



Figure 18. Results – Modify Pharmacy PA Request for Client

Selecting **Modify Request for Client** takes you back to the request page where you can update the details and resubmit.





Chapter 6 – Acronyms

This section provides definitions for document-specific acronyms in the following format: Entries will be listed in alphabetical order, and items beginning with numbers will come first.

Acronym	Definition
CIN	Client Identification Number
DOB	Date of Birth
DOH	Department of Health
ePACES	Electronic Provider Assisted Claim Entry System
ePHI	Electronic Protected Health Information
ETIN	Electronic Transmitter Identification Number
HIPAA	Health Insurance Portability and Accountability Act
HITECH	Health Information Technology for Economic and Clinical Health
ID	Identification
NPI	National Provider Identifier
NYS	New York State
OS	Operating System
PA	Prior Authorization
PAD	Practitioner Administered Drug

Table 5. Acronyms

Appendix A – HIPAA Security and Privacy

Health Insurance Portability and Accountability Act of 1996 (HIPAA) is a federal law that protects health insurance coverage for workers and their families when they change or lose employment. It includes the Privacy Rule (enacted April 14, 2003), which establishes regulations for the use and disclosure of Protected Health Information (PHI), the Security Rule (enacted April 25, 2005), which addresses electronic PHI (ePHI) and establishes the requirements to protect the confidentiality, integrity and availability of PHI created, maintained and transmitted in electronic format, and Health Information Technology for Economic and Clinical Health Act of 2009 (HITECH) which strengthens the HIPAA regulations. HIPAA is intended to:





- Provide better access to health insurance.
- Limit fraud and abuse.
- Reduce the administrative costs of providing health care.
- Standardize the content and format of electronic health care transactions and promote their use.
- Ensure privacy and security of paper and electronic PHI.

Under HIPAA, users are to:

- Utilize unique user id and passwords for each user.
- Share PHI with co-workers who have a "need to know" and the appropriate access.
- Discuss PHI in private areas, not in public areas or in telephone conversations that can be easily overheard by others.
- Keep and protect written and electronic health information from the eyes of others who do not need the information in order to perform their assigned jobs.
- Make sure that casual visitors cannot wander into areas in which clinical or billing information is kept.
- Know when a person's PHI can be shared without the person's permission, and when written or oral permission is required.
- Ensure that all policies or procedures for safeguarding the confidentiality of PHI or other sensitive material are followed.
- Investigate and report to the Compliance Officer or designee any incident where the acquisition, access, use or disclosure of PHI is in a manner not permitted or which compromises the security or privacy of PHI.
- Properly dispose of printed and electronic protected health information.
- Access PHI on company owned equipment in secured locations and not in public settings such as the mall or libraries.

PAXpress users are responsible for the preservation, privacy, and security of data in their possession. While using the application, the user has access to data that contains PHI and must be guarded and disposed of appropriately if downloaded by the user. As covered entities (or vendors operating on behalf of a covered entity), any inappropriate use or disclosure of PHI must be handled as prescribed in the above mentioned federal regulations.



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Appendix B – Version History

Version	Date	Description
v1.0	9/25/2024	Initial rebranded publication.

