Empowering continuity of care through efficient annual insurance reverification

At Biologics by McKesson, we’re here to help you and your patients successfully navigate the complex reverification process, from start to finish, one patient at a time, so you can concentrate on what you do best — providing quality care. We are committed to overcoming the obstacles that threaten your patients’ ongoing access to therapies they need.

A Sense of Urgency Drives Our Process

At Biologics, continuity of care is always a priority. We understand the need to efficiently and swiftly complete reverification, as we know patients fighting life-threatening diseases are anxiously waiting for their medications. Whether a patient is newly diagnosed or receiving ongoing care, our team promptly moves forward to either dispense the prescription or warm transfer it to a specialty pharmacy that meets the patient’s needs.

We Put the Pieces Together for a Trouble-Free Experience

There are many complex components to reverification, and they all can pose a threat to continuity of care. Biologics has deep expertise in reverification and understands how to efficiently and successfully execute each critical stage of the process to mitigate care disruptions:

- A highly trained team promptly confirms benefits
- Our specialists quickly determine if Biologics can dispense the drug
- If so, an expedited process begins to complete prior authorization and facilitate submission to the insurer
- Highly knowledgeable staff then work closely with patients who need financial assistance

If Biologics cannot dispense, our warm transfer service is immediately activated:

- An in-network pharmacy that’s the best fit for the patient is identified
- The referral is quickly forwarded with all documentation
- Receipt of the referral is confirmed by phone
- The prescriber is then given contact information by fax for the prescribing pharmacy

This close attention to detail leaves nothing to chance, ensuring a smooth, uncomplicated transfer that minimizes disruptions in care.
Frequently Asked Questions

Why can’t Biologics provide a list of insurance companies they are contracted with so I will know ahead of time if they work with my patient’s insurance?

Biologics is contracted with over 500 payers at any one time. Coverage actually depends on the patient’s plan itself rather than the payer’s contract with Biologics. Coverage with each payer varies slightly depending on which plan the patient or the patient’s employer has selected, making it difficult to issue generalized statements about coverage with a particular payer.

How does Biologics help my patients during reVerification?

We get in front of the reVerification process, proactively communicating with patients to discover if they are experiencing an insurance change and to identify any new referrals, refills or issues that must be addressed quickly. During reVerification season, we communicate with patients at least 10 days out from a refill, which allows adequate time to address obstacles that can disrupt continuity of care.

How can I help my patients get their medications during reVerification?

There are several best practices providers can follow to help ensure a smooth reVerification:

• Before reVerification season, ask patients if their insurance coverage has changed
• Make sure to collect both medical and pharmacy benefit cards
• Send all information to Biologics including updated clinic notes with recent labs and medication list as soon as possible so we can update our records

What should I expect after a referral is submitted?

If Biologics receives a complete referral, communication with your practice will be minimal, and the reVerification process will proceed efficiently. A complete referral has several critical components, including:

• Detailed patient and insurance information
• Clinical information, including ICD-10 codes with primary diagnosis and stage
• Prescriber information
• Prescription details
• Medication list

If we need additional information, you’ll be contacted by our specialists asking for assistance in gathering the missing data. If you need a more efficient method for developing referrals, our experts will be happy to help your practice develop one. For a complete referral form and other useful documents to enable efficient collaboration with Biologics, visit our Resources page at https://biologics.mckesson.com/resources/#providers.

How can I know whether Biologics will dispense or warm transfer?

Numerous factors determine if Biologics can dispense, and it can be difficult for providers to know what influences this decision. For instance, sometimes the patient’s plan mandates the use of a particular pharmacy. Our goal is to work with patients to find the right pharmacy for them, whether or not we end up dispensing the medication.

Although you won’t see Biologics on the back of a pharmacy benefit card, that doesn’t mean we aren’t in network. In fact, Biologics dispenses most orders, so we are a logical partner for your referral needs. If we can’t dispense, we will expeditiously warm transfer the referral to the most appropriate in-network pharmacy, minimizing the threat of care disruption.

To learn more about how we can help you support your patients during reVerification, call us at 800.850.4306, option 3, or reach out to your Biologics Regional Practice Liaison.