



From: Medco Pharmacy Services

Subject: Pharmacist Resource Center User Guide

The attached updated document is a step-by-step instruction guide for accessing the Medco Pharmacist Resource Center Website. The Medco Pharmacist Resource Center Website is an online tool that allows each user to determine member eligibility and plan benefits.

To align with the HIPAA security requirements, Medco requires the use of pharmacy-specific passwords to ensure appropriate access to the Pharmacist Resource Center Website. In order to access the Pharmacist Resource Center, each user must complete a simple registration process, which will include a user ID and password setup.

Once each user's account is established, they will be required to enter a user ID and password to log on to the Pharmacist Resource Center Website. Each user, pharmacist or pharmacy technician, accessing the Pharmacist Resource Center Website should have his or her user ID and password.

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How does a user setup a Pharmacist Resource Center account?

1. Each person who needs access to the Pharmacist Resource Center Website will need to go to the Pharmacist Resource Center Website at www.medco.com/rph and click on the link “Click here to register today” found in the “Register today” box on the homepage.

The screenshot shows the Medco Pharmacist Resource Center website. The top navigation bar includes the Medco logo and links for Terms of Use and Privacy. A left sidebar contains navigation menus for Tools, Resources, Information, and Medicare Part D. The main content area is titled "Pharmacist Resource Center @medco.com" and features a "Register today." section highlighted with a red border. This section contains an "Important:" notice and a list of capabilities for registered users. To the right is a login section for "Already Registered?" with input fields for user ID and password, and a "login" button. Further right are two utility boxes: "Reject codes" with a dropdown menu and a link to a list of codes, and "Check Cycle Mail Schedule" with a link to view the schedule.

2. After clicking on the link on the homepage you will be taken to the online registration page labeled “Register now.” The following information will need to be entered on the registration page in order to create a Pharmacist Resource Center Website user ID and password:
 - Service provider ID (unique to your retail pharmacy, 7-digit NCPDP, or 10-digit NPI number)
 - Medco account # (9 digit-number unique to the user's retail pharmacy, assigned by Medco)
 - An Rx number submitted to Medco within the last two days. This can be either a rejected or paid claim.
 - The store's zip code.
 - Unique user ID (This is a unique ID each user will create for themselves to use when they login to the website.) Each person at their retail pharmacy who will access the Pharmacist Resource Center Website will need to have their own user ID and password.
 - User's first and last name
 - User's office telephone number
 - Password (must be at between 6 and 10 characters, containing both letters and numbers)

- Password hint (For security reasons, the password and password hint cannot contain your user ID, name, service provider ID, Medco account #, or password. For example: If your password is “Chicago01”, a good hint could be “windy city one”

After all information has been entered, click the “Submit” button.

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Register now!

Please enter the required information below to register with the Pharmacist Resource Center.
[For chain-level registration, click here](#)

Store identification

Store Service Provider ID ([what is this?](#)) Medco Acct #

An Rx number with a date of service within the last two days Store zip code
 -

Personal identification

First name Last name

Phone number
 - -

Create a user ID (you will use this ID for all future logins)

Create a password

 (Must be between 6 and 10 characters combining letters and numbers. Passwords are cAsE-sEnSiTiVE.)

Confirm a password

 (Retype your password exactly as you did above.)

Provide a password hint ([example](#))

submit

*Note: If you do not know your Medco account number, you can call the Pharmacy Services Help Desk and select option 5 from the IVRU prompt and then option 1 to hear your Medco account number.

- If the user has entered all the information correctly, they will see a confirmation message with their user ID. Each time that a user accesses the Pharmacist Resource Center Website, they will be required to enter their user ID and password.

Click on “Continue” to use the website.

The screenshot shows the Medco website header with the logo and navigation links (Terms of Use, Privacy, Logout). A left sidebar contains categories: Tools (Patient search, Rejected claim inquiry, Processed claim inquiry, Contact the Help Desk, Search), Resources (Pharmacy Services Manual, Pharmacy communications, Formulary, FAQs, Product alerts, Prior Authorization Request), Information (About HIPAA, Medco Payer Sheets, Contact numbers, Medco corporate site), and Medicare Part D (Regulatory, Communications, Medicare Part D Payer Sheets, Identification card). The main content area displays a green 'Thank you!' message, stating the user is registered as 'JWSimp' and will be prompted for their user ID and password upon the next login. A 'continue' button is positioned below the message.

- The following screen will display:

The screenshot shows the Medco Pharmacist Resource Center website. The header includes the Medco logo and navigation links (Terms of Use, Privacy, Logout). The left sidebar is identical to the previous screenshot. The main content area features the title 'Pharmacist Resource Center @medco.com' and a welcome message. Below this is a section for 'Important notes about your account' with a bullet point stating that passwords are valid for 60 days. A 'Latest news' section follows, with three items: 'Medco Identification Cards' (with links to view a new ID card, examples of ID cards, and examples of Medicare Part D ID cards), 'Better on-line help with claim rejections...' (with a link to details on newest features), and 'Save time with faster on-line help for processed claims...' (with a link to details on newest features). On the right side, there are two callout boxes: 'Reject codes' (with a dropdown menu and a link to see a list of all NCPDP 5.1 reject codes) and 'Check Cycle Mail Schedule' (with a link to view the mailing schedule).

How does a user determine member/patient eligibility?

1. To start an eligibility search, click on the link "Patient search" from the "Tools" section.

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▶ **Save time with faster on-line help for processed claims...** Need to review claim status and payments? It's easier than ever to get the information you want.
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2. Each user has the option of completing a cardholder ID search or to search by the patient name.

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Patient search

To perform an eligibility lookup and verification, find patient-specific coverage, and obtain a prescription benefit overview, search by **Cardholder ID** number and either **Group Number** or patient **Date of Birth** so that we may provide the most up-to-date and accurate information.

Search by Cardholder ID:
In addition to the Cardholder ID, **at least one** of the below fields must be completed to begin your search.

Cardholder ID:

Cardholder Group Number:

OR

Patient Date of Birth:
 - -

Search by Patient Information:
To search by Patient Information, **all** of below fields must be completed to begin your search.

Last Name:

First Name:

Date of Birth:
 - -

Zip Code:

- a. Cardholder ID Search:
 - i. Enter the cardholder ID (as printed on the member's prescription card)
 - ii. The Cardholder Group number (as printed on the member's

prescription card) or Patient Date of Birth (MM-DD-YYYY) is needed to complete the search.

b. Patient's Name Search:

i. To complete a patient search by the Patient Information option, enter the following information from the Cardholder's ID Card:

1. Last Name
2. First Name
3. Date of Birth (MM-DD-YYYY)
4. Zip code

3. After entering the search criteria, the user will be able to view all details about the eligibility status and benefits for the patient. Under the Patient Eligibility section, the following information is available:

The screenshot shows the Medco website interface. At the top right, there are links for 'Terms of Use', 'Privacy', and 'Logout'. The Medco logo is on the left. A 'Tools' menu is highlighted with a red box, containing options like 'New Patient search', 'Rejected claim inquiry', 'Processed claim inquiry', 'Benefit Overview', 'Drug Coverage', 'Participating Pharmacies', 'Contact the Help Desk', and 'Search'. Below this is a 'Resources' menu. The main content area is titled 'Pharmacist Resource Center' and 'Benefits overview'. It prompts the user to 'Select patient name from the drop down below to view benefit information.' There are two main boxes: 'Patient eligibility information' and 'Group eligibility information'. The patient eligibility box contains fields for Name (EYBTDQ. SMQLMOMC), Member # (859270545560), DOB (04/07/1927), Effective Date (01/01/2008), End Date, Relationship (Member (1)), Gender (Female), and Person Code (001). The group eligibility box contains fields for Name (GEORGIA LIS2), Group # (IN101122), Group Effective Date (01/01/2008), Group End Date, Patient Status (Active), and Claim Type (Card/Direct/Home Delivery).

- a. The relationship field will indicate the relationship of the patient (i.e., member, spouse, child, etc.).
- b. The person code field will indicate the person code for the patient (i.e., 001=member, 002=spouse, 003=child, 004=other, etc.).

4. From the Eligibility and Benefits page, once eligibility has been identified, the

The screenshot shows the 'Benefit overview' page. On the left, there is a sidebar with links for 'About HIPAA', 'Medco Payer Sheets', 'Contact numbers', 'Medco corporate site', 'Medicare Part D', 'Regulatory Communications', 'Medicare Part D Payer Sheets', and 'Identification card'. The main content area is titled 'Benefit overview' and has a sub-section 'Are you a participating location?: Yes'. Below this is a 'Coverage Details' table with the following information:

Coverage type:	Full Family
Refills too soon overrides:	(3) Vacation Supply or (5) Therapy Change
Refill too soon %: (Amount required to be used prior to refill)	75
Newborn coverage:	30 Days
Dependant age limit:	99
Student age limit:	99

Benefits Overview section provides coverage details for the patient. The Benefits Overview show if the user's retail pharmacy is a participating pharmacy, the refill-too-soon override codes approved by the patient's group, the patient's deductible, and much more.

How does a user perform a Drug Coverage Lookup?

1. First, perform a [Patient search](#).
2. Click on the link "Drug Coverage" from the "Tools" section.

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Pharmacist Resource Center

Benefits overview

Select **patient name** from the drop down below to view benefit information.

Patient eligibility information	
Name:	EYBTDQ, SMQLMOMC
Member #:	859270545560
DOB:	04/07/1927
Effective Date:	01/01/2008
End Date:	
Relationship:	Member (1)
Gender:	Female
Person Code:	001

Group eligibility information	
Name:	GEORGIA LIS2
Group #:	IN101122
Group Effective Date:	01/01/2008
Group End Date:	
Patient Status:	Active
Claim Type:	Card/Direct/Home Delivery

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3. The Drug Coverage screen will allow each user to search for a drug by Product Description or by Product Service ID. The user can also choose the patient on this

Search

There may be changes to this patients formulary. [View all formulary changes now.](#)

Search by product description or product service ID

Pharmaceutical products are listed by both generic (chemical) and brand (trade) names.

Product Description:

Product Service ID: **Qualifier:**

This information is intended to serve as a general overview of the plan sponsor's prescription benefit... Please note that the coverage and pricing terms of this program prescription benefit are subject...

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screen.

4. Click on search


- If the description was used to search, then a list of drugs will appear. Select the radio box next to the drug and click on "next". Searching by using the Product Service ID will not display the below screen, it will open the Drug Coverage screen

<ul style="list-style-type: none"> Product alerts Prior Authorization Request Information About HIPAA Medco Payer Sheets Contact numbers Medco corporate site Medicare Part D 	<input type="button" value="back"/> <input type="button" value="next"/>			
Product Service ID/Product Description	Qualifier	Strength	Brand/Generic	Form
<input checked="" type="radio"/> 00006073528 Zocor	NDC	10mg	MultiSource	Tablet
<input type="radio"/> 00006073531 Zocor	NDC	10mg	MultiSource	Tablet

directly.

- After clicking next, the Drug Coverage screen will appear.

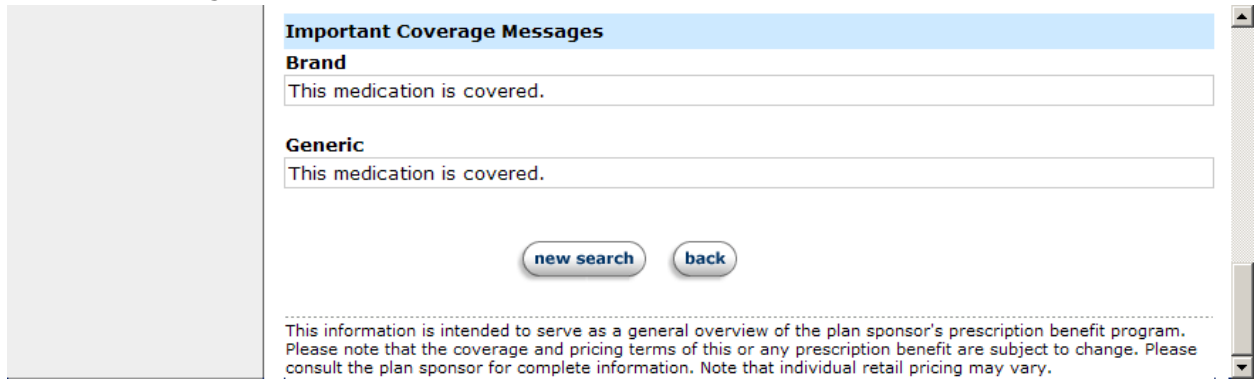
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<ul style="list-style-type: none"> Tools New Patient search Rejected claim inquiry Processed claim inquiry Benefit Overview Drug Coverage Participating Pharmacies Contact the Help Desk Search Resources Pharmacy Services Manual Pharmacy communications Formulary FAQs Product alerts Prior Authorization Request Information About HIPAA Medco Payer Sheets Contact numbers Medco corporate site Medicare Part D Regulatory Communications Medicare Part D Payer Sheets Identification card 	<p style="text-align: center;">Pharmacist Resource Center</p> <h2 style="text-align: center;">Drug Coverage</h2> <p>Select patient name from the drop down below to view drug coverage.</p> <p>Patient name: <input type="text" value="LQDDO, QYGYK"/></p> <div style="background-color: #e6f2ff; padding: 5px;"> <p>Coverage and copay</p> <table border="0"> <tr> <td>Product Description:</td> <td>Zocor Tablet 10mg</td> <td>Product Service ID:</td> <td>00006073528</td> </tr> <tr> <td>Generic Name:</td> <td>SIMVASTATIN</td> <td>Qualifier:</td> <td>NDC</td> </tr> <tr> <td>Generic Available?</td> <td>Yes</td> <td>GCN #:</td> <td>026532</td> </tr> <tr> <td></td> <td></td> <td>Form:</td> <td>Tablet</td> </tr> </table> </div> <div style="background-color: #e6f2ff; padding: 5px;"> <p>Retail Pharmacy Benefit</p> <table border="1"> <thead> <tr> <th></th> <th>Requested</th> <th>Plan Max</th> </tr> </thead> <tbody> <tr> <td>Days' Supply:</td> <td>90</td> <td>90</td> </tr> <tr> <td>Quantity:</td> <td>90</td> <td>N/A</td> </tr> <tr> <td>Refills Allowed:</td> <td></td> <td>No</td> </tr> </tbody> </table> <table border="1"> <thead> <tr> <th></th> <th>Brand</th> <th>Generic</th> </tr> </thead> <tbody> <tr> <td>Approximate Patient Cost:</td> <td>103.69</td> <td>0.00</td> </tr> <tr> <td>Explain patient cost</td> <td></td> <td></td> </tr> <tr> <td>Approximate Amount Applied to Deductible:</td> <td>0.00</td> <td>0.00</td> </tr> <tr> <td>Starting stage:</td> <td>Initial coverage</td> <td>Initial coverage</td> </tr> <tr> <td>Ending stage:</td> <td>Initial coverage</td> <td>Initial coverage</td> </tr> <tr> <td>What are stages?</td> <td>Show pricing in all stages</td> <td>Show pricing in all stages</td> </tr> </tbody> </table> </div> <p style="background-color: #fff9c4; padding: 5px;">*You can recalculate by changing the quantity and days' supply.</p>	Product Description:	Zocor Tablet 10mg	Product Service ID:	00006073528	Generic Name:	SIMVASTATIN	Qualifier:	NDC	Generic Available?	Yes	GCN #:	026532			Form:	Tablet		Requested	Plan Max	Days' Supply:	90	90	Quantity:	90	N/A	Refills Allowed:		No		Brand	Generic	Approximate Patient Cost:	103.69	0.00	Explain patient cost			Approximate Amount Applied to Deductible:	0.00	0.00	Starting stage:	Initial coverage	Initial coverage	Ending stage:	Initial coverage	Initial coverage	What are stages?	Show pricing in all stages	Show pricing in all stages
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Starting stage:	Initial coverage	Initial coverage																																																
Ending stage:	Initial coverage	Initial coverage																																																
What are stages?	Show pricing in all stages	Show pricing in all stages																																																

- This screen will give you details of the plan benefit, including maximum days supply allowed and maximum quantity allowed.

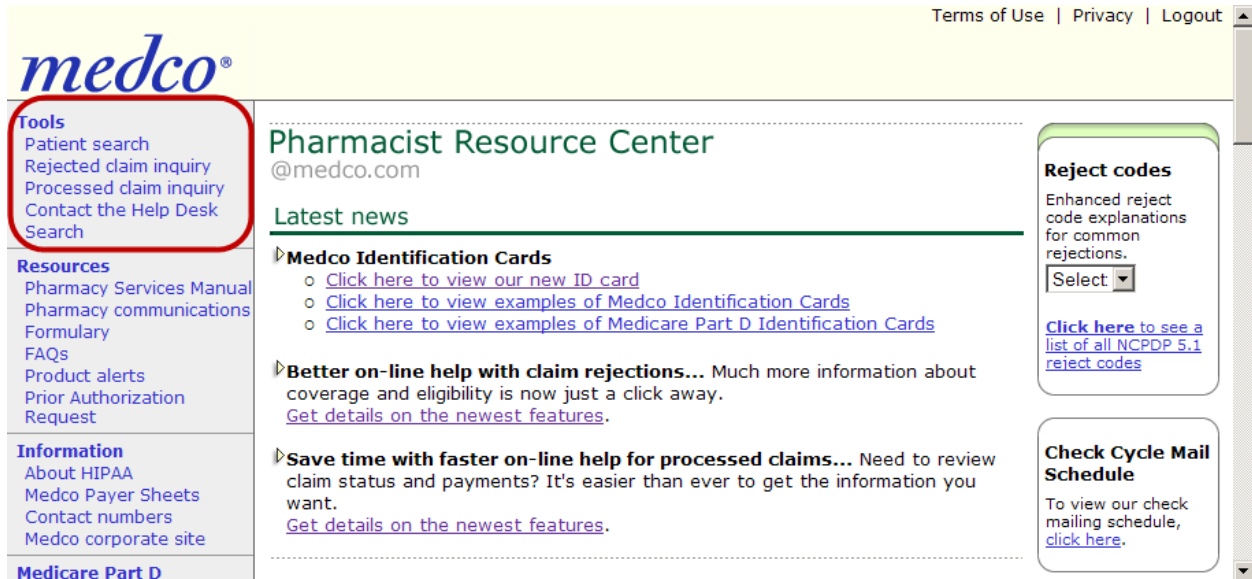
8. Each user will also be able to view any additional information on brand and generic drugs.



The screenshot displays a web interface with a light blue header for 'Important Coverage Messages'. Below this, there are two sections: 'Brand' and 'Generic'. Each section contains a text box with the message 'This medication is covered.'. At the bottom of the main content area, there are two buttons: 'new search' and 'back'. A dotted line separates the main content from a disclaimer at the bottom, which reads: 'This information is intended to serve as a general overview of the plan sponsor's prescription benefit program. Please note that the coverage and pricing terms of this or any prescription benefit are subject to change. Please consult the plan sponsor for complete information. Note that individual retail pricing may vary.'

How does a user lookup a rejected claim?

1. To start, click on the “Rejected claim inquiry” link in the “Tools section.



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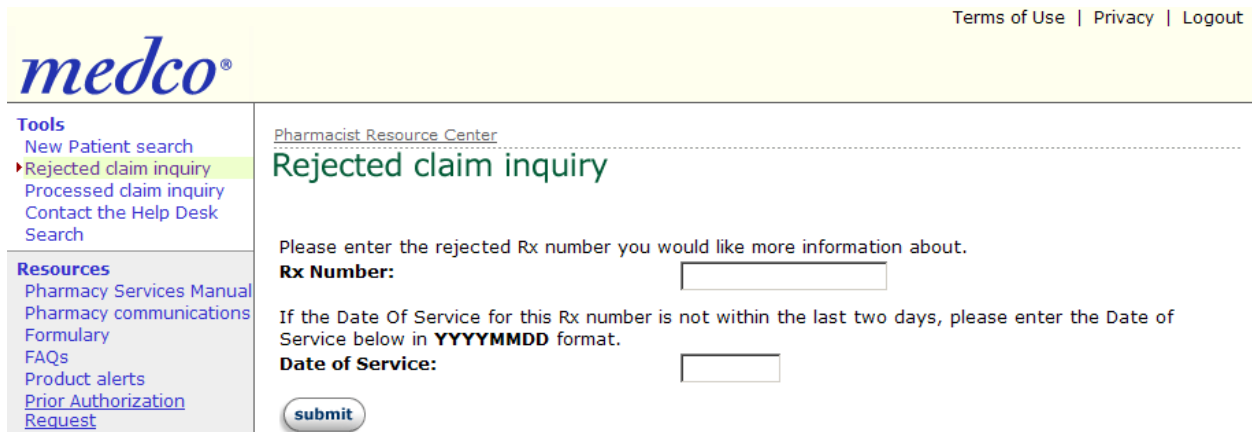
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2. The user will be prompted to enter the Rx Number and Date of Service.



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Rejected claim inquiry

Please enter the rejected Rx number you would like more information about.

Rx Number:

If the Date Of Service for this Rx number is not within the last two days, please enter the Date of Service below in **YYYYMMDD** format.

Date of Service:

3. After completing the form and clicking the “submit” button, each user will be able to view:
 - a. Submitted claim information
 - b. Rejection code
 - c. Drug coverage details



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Rejected claim inquiry

Rx number: 0831552
DOS: 01/27/2009

Drug Information

Drug name & strength: Prazosin hcl 5mg
Form: Capsule

Submitted Claim Information

Cardholder ID:	0363705489	Group #:	5803079STD
Patient name:	QYGYK LQDDO	Date of Birth:	07/11/1939
Relation code:	1	Person code:	01
Gender:	1		

Rejection Code: 41
Rejection Text: Submit Bill To Other Processor Or Primary Payer
Secondary Text: SUBMIT BILL TO OTHER PROCESSOR OR PRIMARY PAYER

This patient has primary coverage with another plan or insurance. The claim must first be submitted to the primary insurance for payment.

Please check the Other Coverage Code field on your claim to ensure you are submitting the appropriate value.

How does a user look up a processed claim?

1. Click on the “Processed claim inquiry” link from the “Tools” section.

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Processed claim inquiry

Please enter the Rx number of the processed claim for payment information.
Rx Number:

Please enter the Date of Service below in **YYYYMMDD** format.
Date of Service:

3. After completing the form and clicking the “submit” button, each user will be able to view:
 - a. Submitted claim information
 - b. Processed claim information
 - c. Check date and check number



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Processed claim inquiry

Rx number: 0835979
DOS: 02/05/2009

Drug Information

Drug name & strength: Digoxin 125mcg
Form: Tablet

Submitted Claim Information

Cardholder ID:	0363705489	Group #:	5803079STD
Patient name:	QYGYK LQDDO	Date of Birth:	07/11/1939
Relation code:	1	Person code:	01
Gender:	1		

Processed Claim Information

Date processed: 02/05/2009
Patient paid: \$0.00
Pharmacy reimbursement: \$6.91
Authorization number: OMXNPFD

This claim payment was included in the check dated 02/19/2009 and check # 007705361.

How does a user submit a too old override request?

1. Select "Contact the Help Desk" under the "Tools" section.

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Enhanced reject code explanations for common rejections.
Select ▾
[Click here to see a list of all NCPDP 5.1 reject codes](#)

Check Cycle Mail Schedule
To view our check mailing schedule, [click here.](#)

2. Click on "A specific prescription claim" link.

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Contact the Help Desk

In addition to the toll-free telephone service, the Medco Help Desk can now be reached via e-mail. Before sending us a message, you may want to read our [FAQs](#) - chances are someone else has asked a similar question. If not, please select from one of the categories below.

▶ To help us serve you better, please select from the categories below:

- **[A specific prescription claim.](#)**
- **[Eligibility.](#)**
- **[This store or pharmacy chain.](#)**
- **[A general inquiry.](#)**
- **[HIPAA regulations.](#)**
- **[Pricing inquiry.](#)**

Please use this feature for any issue not requiring immediate resolution. You should receive a response to your inquiry within 24 hours but please keep in mind that final resolution of your question may require additional time and research.

3. The contact form will be displayed.



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Contact the Help Desk

Claim Inquiry

Please enter information for one patient in the fields below and click on the submit button when complete. Claim inquiries for additional patients need to be entered on subsequent pages. **Fields marked with an * are required.**

Your Information

*Name:

*Phone Number: - -

E-mail Address:

Fax Number:

Store Information

*Service Provider ID or Chain ID#:

*Store/Chain Name:

*City:

*State:

Claim Information

*Cardholder ID:

*Group #:

Patient First Name:

Patient Last Name:

*Date of Birth: - -

Prescription Information

*Prescription Number 1: <input type="text"/>	*Date of Service: <input type="text"/> - <input type="text"/> - <input type="text"/>
*Prescription Number 2: <input type="text"/>	*Date of Service: <input type="text"/> - <input type="text"/> - <input type="text"/>
*Prescription Number 3: <input type="text"/>	*Date of Service: <input type="text"/> - <input type="text"/> - <input type="text"/>
*Prescription Number 4: <input type="text"/>	*Date of Service: <input type="text"/> - <input type="text"/> - <input type="text"/>
*Prescription Number 5: <input type="text"/>	*Date of Service: <input type="text"/> - <input type="text"/> - <input type="text"/>

*Reason for Claim Reject:

submit

- The following information is required:
 - User's name
 - User's telephone number
 - User's email address
 - User's fax number
 - Store Service Provider ID
 - Store name
 - Store City
 - Store State

- i. Patient cardholder ID
- j. Patient group number
- k. Patient first name
- l. Patient last name
- m. Date of Birth

Each user can enter up to 10 claims for one member per screen.

- 2. Once the information has been entered the user will need to select the reason for submitting the Claim too old request.

The screenshot shows a web form with the following fields and options:

- *Prescription Number 7:
- *Date of Service: - -
- *Prescription Number 8:
- *Date of Service: - -
- *Prescription Number 9:
- *Prescription Number 10:
- *Reason for Claim Reject:

The dropdown menu for 'Reason for Claim Reject' is open, showing the following options:

- Please make a selection
- Claim too old - Long term facility
- Claim too old - Post consumption
- Claim too old - Account reconciliation
- Claim too old - Member information just received
- Claim too old - Other
- Reversal Not Processed

A 'submit' button is located below the form.

- 3. A Claim too old rejection will also need to be submitted to Medco through the POS system. Without it, the website request will not be reviewed.

What does a user do if they still need assistance?

If a user needs help accessing or navigating within the Medco Pharmacist Resource Center Website, they can contact the **Medco Pharmacy Services Help Desk @ 1-800-922-1557**. The Help Desk is available 24 hours a day, 7 days a week.