

General Information	
<p>Superior HealthPlan has contracted with CVS Caremark® as our Pharmacy Benefit Manager (PBM). The Texas Vendor Drug Program (VDP) supplies the Texas Medicaid Preferred Drug List (PDL) and clinical edit criteria that are utilized by Envolve Pharmacy Solutions.</p>	
<p>Find a pharmacy through our pharmacy network online at www.SuperiorHealthPlan.com/members/medicaid/find-a-provider.html.</p>	
<p>Find details on the pharmacy program at SuperiorHealthPlan.com/ProviderPharmacy</p>	
Pharmacy Services Contact Information	Superior Pharmacy Contact Information
<p>The Pharmacy and Provider Services Help Desk Phone: 1-866-768-7147</p>	<p>Medicare (Wellcare By Allwell) and STAR+PLUS Medicare-Medicaid Plan [MMP] Pharmacy Department Phone: 1-800-218-7453, ext. 54019 Fax: 1-866-683-5631</p>
<p>Website https://rxservices.cvscaremark.com/</p>	
<p>CVS Caremark (Mail Order Services) Phone: 1-866-624-1139 Register Online: https://www.caremark.com/ Mail Completed Forms: CVS Caremark® Mail Service Pharmacy (PDF)</p>	
<p>CVS Pharmacy Help Desk (Available 24/7) Phone: 1-888-865-6567</p>	
Prior Authorizations	
<p>Prior Authorization (PA) forms are available electronically through the CoverMyMeds platform. CoverMyMeds is an easy and efficient way to complete PA requests and submit clinical information for further review by Pharmacy Services. For more information about CoverMyMeds, please contact Pharmacy Services at 1-866-399-0928.</p>	
<p>Durable Medical Equipment/Medical Supplies Covered Durable Medical Equipment (DME)/Medical Supplies may be obtained through a Superior HealthPlan participating provider.</p> <p>Superior DME PA Department Phone: 1-800-218-7508, ext. 53227</p>	<p>Outpatient Medication Administration PA Requests Phone: 1-866-768-7147 Fax: 1-866-683-5631</p>
<p>Ambetter PA Requests Phone: 1-877-725-7749 (Option 3) Fax: 1-800-977-4170</p>	<p>Medicaid/CHIP PA Requests Phone: 1-866-768-7147 Fax: 1-833-423-2523</p>
<p>Medicare Part D Coverage Determination (Medicare Pharmacy PA Department) Phone (All): 1-800-867-6564 Fax (Wellcare By Allwell): 1-866-226-1093 Fax (MMP): 1-877-941-0480</p>	<p>Medicare Part B Drugs PA Requests Phone: 1-844-982-1578 Fax: 1-844-960-1785</p>

Superior HealthPlan Pharmacy

Quick Reference Guide



Pharmacy Services Peer-to-Peer

Phone: 1-866-768-7147

Peer-to-Peer (Behavioral Health Drugs Only)

Phone: 1-866-349-5794

Appeals		
<p>Wellcare By Allwell</p> <p>Centene Corporation Attn: Grievances & Appeals Medicare Operations 7700 Forsyth Blvd. Saint Louis, MO 63105</p> <p>Phone: 1-877-935-8023 TTY: 711 Fax: 1-844-273-2671 Website: Wellcare.SuperiorHealthPlan.com</p>	<p>Ambetter from Superior HealthPlan</p> <p>Written Appeals</p> <p>Centene Company of Texas 5900 E. Ben White Blvd. Austin, TX 78741</p> <p>Fax: 1-866-918-2266</p> <p>Oral Appeals</p> <p>Phone: 1-877-398-9461 TTY: 1-800-735-2989</p>	<p>Medicaid (STAR, STAR Health, STAR Kids, STAR+PLUS) and CHIP</p> <p>Written Appeals</p> <p>Centene Company of Texas 5900 E. Ben White Blvd. Austin, TX 78741</p> <p>Fax: 1-866-918-2266</p> <p>Oral Appeals</p> <p>Phone: 1-877-398-9461 TTY: 1-800-735-2989</p>
Helpful Websites		
<ul style="list-style-type: none"> • Prescription drug quantity limits are posted on Superior's Pharmacy Resources webpage: SuperiorHealthPlan.com/ProviderPharmacy • The Texas Medicaid Formulary is available via the Texas VDP website. The formulary is regularly updated and posted by the VDP at www.txvendordrug.com. • The Texas Medicaid Prior Authorization Criteria is available via the Texas VDP website at www.txvendordrug.com/formulary/prior-authorization/preferred-drugs. • A link to clinical criteria for non-preferred medications is available on the Superior website at SuperiorHealthPlan.com/ProviderPharmacy • Clinical prior authorization/edits are created by the VDP. A direct link to all clinical edits currently used by Superior for Medicaid members is available at SuperiorHealthPlan.com/ClinicalPriorAuth • Lists of Drugs (Formularies) <ul style="list-style-type: none"> ○ Wellcare By Allwell from Superior HealthPlan: Wellcare.SuperiorHealthPlan.com ○ Ambetter from Superior HealthPlan: Ambetter.SuperiorHealthPlan.com/provider-resources/pharmacy.html ○ STAR+PLUS Medicare-Medicaid Plan (MMP): MMP.SuperiorHealthPlan.com/mmp/prescription-drug-part-d/formulary.html 		