



300 Corporate Center Drive  
Camp Hill, PA 17011

[Provider First Name] [Provider Last Name]  
[Provider Address 1] [Provider Address 2]  
[Provider City], [Provider State] [Provider Zip]

### **Urgent Prior Authorization Changes**

May 13, 2019

Dear Dr. [Provider Last Name],

The Pennsylvania Health and Wellness pharmacy benefit manager will be changing their claims processor to RxAdvance effective as of **June 1, 2019**. With that change, the prior authorization submission process has been updated.

This letter is to let you know that effective **June 1, 2019**, Pennsylvania Health and Wellness prior authorizations will need to be sent to the new fax number, **1.877.386.4695**. The prior authorization phone number, 1.866.399.0928, will NOT be changing.

The process to securely and electronically transmit PA requests through CoverMyMeds.com will NOT change.

Visit **CoverMyMeds.com/EPA/EnvolveRx** to begin using this *free* service.

Pennsylvania Health and Wellness will work with you to make sure you experience as little disruption to your workflow as possible.

For more information, you can also call Provider Services at **1-844-626-6813**, TDD/TTY: **1-844-349-8916**.

Thank you,

Pennsylvania Health and Wellness