Department:	Pharmacy Management	**Original Approval:**	12/17/2018
Policy No:	PM516	**Last Approval:**	05/26/2026
Policy Title:	Emergency Fill Policy		
Approved By:	Clinical Services Leadership Team		
Dependencies:	N/A		

Purpose

This policy describes the process to avoid interruption of current therapy or delay the initiation of therapy for medications that are requiring prior authorization (PA) for Community Health Plan of Washington (CHPW) Apple Health enrollees and Individual & Family (Cascade Select) Cascade Select members & Apple Health Expansion. The emergency fill provides a temporary solution while awaiting a PA or medical necessity determination for drug coverage.

Policy

The definition of an "Emergency Fill" means the dispensing of a prescribed medication to an enrollee by a licensed pharmacist at a participating pharmacy who has used his or her professional judgment in identifying that the enrollee/member has an emergency medical condition for which lack of immediate access to pharmaceutical treatment would result in (a) placing the health of the individual (or, with respect to a pregnant woman, the health of the woman or her unborn child) in serious jeopardy; (b) serious impairment to bodily functions; or (c) serious dysfunction of any bodily organ or part. If the dispensing pharmacist decides the client has an urgent medical need, they are to determine the quantity necessary to meet the client's urgent medical need, up to a seven (7) calendar day supply. Some situations can include, but not limited to:

- The prescriber is unavailable to choose an alternative
- The PA request is incomplete and cannot be processed
- The prescription has a rejection due to refill-too-soon when the new fill is due to lost, stolen, broken, or damaged.
- The dispensing pharmacist cannot reach the issuer's prior authorization department by phone as it is outside of that department's business hours; or
- An issuer is available to respond to phone calls from a dispensing pharmacy regarding a covered benefit, but the issuer cannot reach the prescriber for full consultation.

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Apple Health will either cover emergency fills without authorization or guarantee authorization and payment after the fact for an emergency fill dispensed by a contracted pharmacy. The authorization for the prescription will match the drug quantity and days' supply as dispensed by the pharmacist. Some exclusions for Apple Health enrollees can include, but are not limited to:

- The medication has a DESI classification other than "Safe and Effective"
- The medication belongs to a non-covered therapeutic category such as appetite suppressants, non-covered over-the counter products, or infertility treatments.
- The medication is professionally administered or durable medical equipment and should be billed as a medical claim.
- The medication is only billable to Apple Health Fee-For-Service such as medications for Hemophilia, or Hepatitis C.

Individual & Family (Cascade Select) will only cover the Emergency Fill dosage of the Prescription Drug. In the event the Prescription Drug is continued for treatment beyond the approved Emergency fill, standard formulary restrictions and utilization management procedures will apply.

Some limitations that apply to Individual & Family (Cascade Select) members include, but are not limited to:

- Emergency Fills are not available for certain Specialty Drugs, such as oncology drugs, hepatitis C, biologics, multiple sclerosis treatments, and enzyme replacements, which do not meet the criteria for "urgent therapeutic need"
- Emergency Fills are not covered at Non-Participating Pharmacies

In the event the pharmacy needs support, they may call the Express Scripts Pharmacy Help Desk at 800-922-1557. In addition, they may call CHPW Customer Service at 800-440-1561 or CHNW Customer Service at 1-866-907-1906.

List of Appendices

Appendix A: Detailed Revision History

Citations & References

CFR	21 CFR § 1306.11, 42 CFR § 438	
WAC	246-869-100, 246-869-105, 246-887-020, 284-43-5170; 284-43-5642	
RCW	48.43.420, 48.44, 69.50.308	
	☒ **WAHIMC**	IMC Section 17.3: Pharmacy Benefits and Services

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LOB & Contract Citation	☐ **BHSO** ☐ **Wraparound** ☐ **SMAC** ☐ **HH**	
	☒ **AHE**	Apple Health Expansion 6.6.5: The Contractor shall either cover emergency fills without authorization, and guarantee authorization and payment after the fact, for any emergency fill dispensed by a contracted pharmacy, 6.6.5.1: The Contractor shall post the Emergency Fill policy on its website to be visible and easy to access for Providers
	☐ **MA/DSNP**	
	☐ **CS**	
Other Requirements		
NCQA Elements	UM 11	
References		

Revision History

SME Review:	11/20/2018; 12/06/2019; 11/06/2020; 11/09/2021; 12/22/2021; 11/02/2022; 09/19/2023; 07/30/2024; 06/24/2025; 05/26/2026
Approval:	12/17/2018; 11/09/2020; 11/09/2021; 12/27/2021; 11/04/2022; 08/05/2024; 07/01/2025; 05/26/2026

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Appendix A: Detailed Revision History

Detailed Revision History

Revision Date	Revision Description	Revision Made By
11/20/2018	Original	Mary Eckhart
12/17/2018	Approval	MMLT
12/06/2019	Annual review. Update to contract citations	Jennifer Farley, PharmD
12/19/2019	Approval	Yusuf Rashid
02/24/2020	Updated Citations Table	Dustin Peskuric
10/15/2020	Updated	Becki Braband
11/06/2020	Updates and review	Omar Daoud
11/06/2020	Approval	Yusuf Rashid
11/09/2020	Approval	CMO Cabinet
11/09/2021	Reviewed no updates. Approved.	Omar Daoud
11/09/2021	Approval	CMO Cabinet
12/22/2021	Changed quantity to seven-day supply	Rachael Olsufka, PharmD, MS, BCGP
12/22/2021	Approval	Omar Daoud
12/27/2021	Approval	CMO Cabinet
11/02/2022	Reviewed with no changes	Omar Daoud
11/04/2022	Approval	CMO Cabinet
09/19/2023	Reviewed no changes	Omar Daoud
09/20/2023	Approval	Clinical Services Leadership Team
01/12/2024	Minor updates	Erin Riddle
07/30/2024	Reviewed , no changes	Omar Daoud
08/05/2024	Approval	Clinical Services Leadership Team
06/24/2025	Reviewed, no changes	Omar Daoud
07/01/2025	Approval	Clinical Services Leadership Team
5/26/2026	Reviewed, no changes	Omar Daoud
05/26/2026	Approval	Clinical Services Leadership Team

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