

MAC Appeals Process

Create a PRC Account

- Navigate to the PRC website at <https://prc.express-scripts.com>
- Select the Register Button

EXPRESS SCRIPTS®

Log In Register

FAQs Resources Contact Us

Pharmacist Resource Center

EXPRESS SCRIPTS® Pharmacist Resource Center Welcome, Pharmacy Name

Home Patient Search Claim Search Pricing/MAC Appeal Resources Contact Us

Search By: Patient Name Cardholder ID

First Name Last Name DOB Sex
Joe Palmer 01/15/1980 M

Search

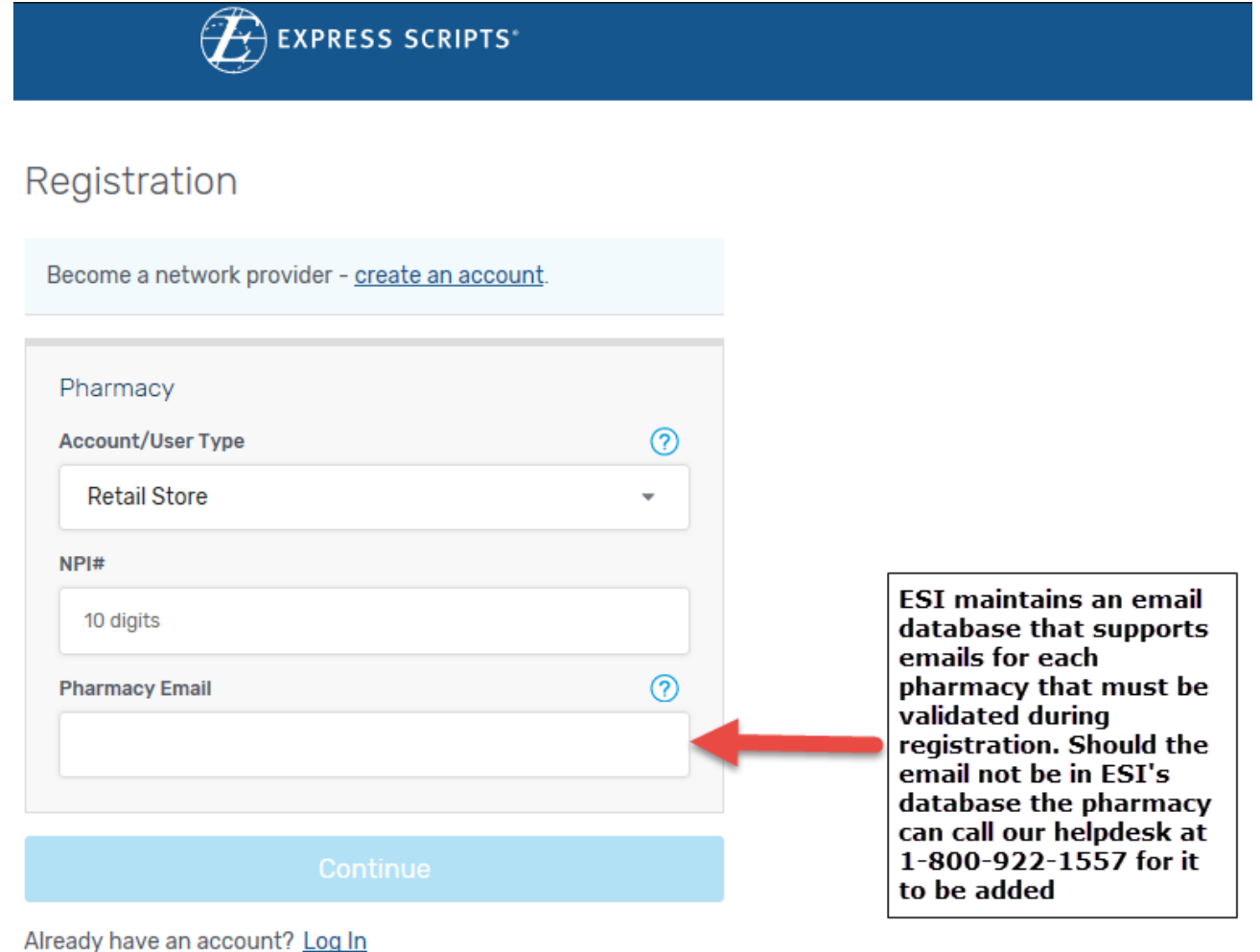
Name	Cardholder ID	DOB	Group #	Effective	Exp Date	Ph No	Y/N
Joe Palmer 123456789	ABC1234567	01/15/1980	ABC0	01/01/2016	12/31/9999	123456	12345678

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Step 1: Pharmacy Validation

- Enter your Pharmacy NPI #
- Enter your Pharmacy Email Address



The screenshot shows the Express Scripts registration interface. At the top is the Express Scripts logo. Below it is the heading "Registration" and a link to "Become a network provider - create an account." The main form area is titled "Pharmacy" and contains three fields: "Account/User Type" with a dropdown menu set to "Retail Store", "NPI#" with a text input field containing "10 digits", and "Pharmacy Email" with an empty text input field. A red arrow points to the "Pharmacy Email" field. Below the form is a "Continue" button. At the bottom, there is a link: "Already have an account? [Log In](#)".

ES maintains an email database that supports emails for each pharmacy that must be validated during registration. Should the email not be in ESI's database the pharmacy can call our helpdesk at 1-800-922-1557 for it to be added

Step 2: Fill out Registration Form

User

User Role

Pharmacist

First Name

Last Name

Personal Email

Use pharmacy email

Account

Username

Cannot match first or last name

Password

show

Confirm Password

show

Please accept the [Terms of Use](#) and [Privacy Policy](#)

Register

Already have an account? [Log In](#)

Submitting MAC Appeals

Navigate to the MAC Appeals screen

Welcome **Pharmacy Name**

Patient Search

Check benefits, drug coverage, in-network pharmacies

Claim Search

View processed and rejected claims

Pricing/MAC Appeal

Check status of pricing / MAC reimbursement appeal

Pharmacy Matters

August 29, 2019

August 27, 2019

[View Archive](#)

Recent Messages

[Emergency override for Refill Too Soon due to severe weather and flooding in Texas \(09/20/2019\)](#)

[Virginia Hurricane Dorian \(09/03/2019\)](#)

[Emergency override for Refill Too Soon due to Hurricane Dorian in Florida \(08/30/2019\)](#)

[Emergency override for Refill Too Soon due to Hurricane Dorian in Georgia \(08/30/2019\)](#)

[Express Scripts PDP and MA-EGWP plans implement emergency override for Refill Too Soon due to Tropical Storm Dorian in Puerto Rico \(08/27/2019\)](#)

Step 1: Enter Claim information

Pricing / MAC Appeal

[Submit Inquiry](#) [Inquiry Status](#)

[Submit an AWP or MAC pricing inquiry.](#)

Looking for TRICARE or Inside Rx MAC Appeals? [Click here.](#) 

Pharmacy Information

Pharmacy Details

Pharmacy:

Address:

Phone:

NPI:

NCPDP:

[Information not accurate?](#)

Claim Information

Rx Number Of Claim:

6 or more digits

Date Of Service

10/4/2018 or later

[Continue to Pricing](#)

Step 2: Enter Appeals information

Claim Information

Prescription Number:
NDC Number:
Product Description:
Quantity:
Unit:
Days Supply:

Claim Details

[Change Rx](#)

Pharmacy Pricing Information

Acquisition cost ?
\$ per

Desired reimbursement for this prescription ?
\$

Primary reason for this pricing inquiry

I agree to send pricing coordination

By checking this box, I confirm my understanding that as part of the pricing inquiry submission process, Express Scripts requests that I fax my invoice showing the acquisition cost per unit. To ensure efficient handling, a customized fax cover sheet will be provided for printing once I submit my inquiry. (This customized fax cover sheet will also be available on the inquiry details page in the Check pricing/NAC inquiry status section of this website.)

Contact information

Name

Email address ?

Confirm email address

Phone number

[Submit](#)

Step 3: Print Fax Cover and Fax Invoice

EXPRESS SCRIPTS™ Pharmacist Resource Center Pharmacy Name - [icon]

[Home](#) [Patients](#) [Claims](#) [Pricing/MAC Appeal](#) [Resources](#) [Contact Us](#)

Pricing / MAC Appeal

[Submit Inquiry](#) [Inquiry Status](#)

[Submit an RMP or MAC pricing inquiry](#)

Confirmation

Express Scripts has received your pricing inquiry. An email message, which includes the case number noted below, has been sent to the email address shown below. Your inquiry should be completed within 90 business days. We will communicate with you via email any status changes on this inquiry.

[Check pricing/MAC inquiry status](#) [IT](#)

Please go to [Inquiry Status](#) and print your customized fax cover page and fax it with your invoice, showing the acquisition cost per unit related to this inquiry, to our toll-free fax line, 1-877-333-2020. Please use the fax cover page provided here, as it includes the case number of this inquiry and will ensure efficient handling of your pricing inquiry. The cover page also provides further direction about the expected invoice contents.

Inquiry Information

Request/Case Number	AP944-72914218226
Date Submitted	10/04/2019
Acquisition Cost Per Unit	\$ 5.00 per each
Desired Reimbursement	\$ 51.00
Primary Reason	product shortage

Claim Information


No. Number Of Claim	Claim Details
Date Of Service	
NDC Number	
Product Description	
Quantity	
Unit	
Days Supply	

Pharmacy Information

Pharmacy	Pharmacy Details
Address	
BN Number	
NCPDP Number	

Contact Information

Name	User Details
Email Address	
Phone Number	

[Inquiry Status](#) [Print this page](#)  [New Inquiry](#)

Email Confirmation

Pharmacist Resource Center

Pricing Inquiry Received

Thank you for contacting Express Scripts Pharmacy Services. We have received your pricing inquiry and have assigned it a case number. The case details are below. *We expect to resolve your inquiry in no more than 10 business days*, and will provide you with a status update as soon as we have further information to share.

Please [log-in](#) to **print a customized fax cover sheet** and then fax us the invoice showing your acquisition cost per unit.

Inquiry details	
Case number:	APMM-116xxxxxx
Status:	In Progress
Date submitted:	10/04/2019
Pharmacy:	Pharmacy Name address
NPI:	xxxxxxxxxx
NCPDP:	xxxxxx
Rx number:	00000xxxxxx
Date of service:	10/04/2019
Cardholder ID:	XXXXXX3266
Cardholder group number:	RX4xxxx
NDC:	xxxxxxxxxx
Product description:	ESCITALOPRAM OXALATE 10 MG
Quantity:	90.000
Unit:	Each
Days supply:	90
Acquisition cost per unit:	\$5.00 per
Desired reimbursement for this prescription:	\$51.00
Primary reason for this pricing inquiry:	Product shortage
Contact name:	User Name
Submitter telephone number:	User Phone Number
Submitter email address:	User email Address

[check inquiry status](#)

Please do not reply to this e-mail. If you have any questions about this message, please call our toll-free Pharmacy Services Help Desk telephone number, **1 800 922-1557**.

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Email Resolution



Pharmacist Resource Center

Pricing inquiry resolved

Thank you for contacting Express Scripts Pharmacy Services.

[Click here](#) to see an explanation regarding the resolution of the pricing inquiry.

Case details

Case number:	APMM-11xxxxxxxx
Contact name:	User Name
Date submitted:	10/04/2019
Pharmacy:	Pharmacy Name Pharmacy Address
NPI:	xxxxxxxxxx
Rx number:	000000xxxxxx
Date of service:	10/04/2019
Cardholder ID:	XXXXXX3266
Cardholder group number:	Rxxxxxxx
Product description:	ESCITALOPRAM OXALATE 10 MG
Quantity:	90.000

Please do not reply to this e-mail. If you have any questions about this message, please call our toll-free Pharmacy Services Help Desk telephone number, **1 800 922-1557**.

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Checking MAC Appeals

Step 1: Select the Inquiry Status tab

Pricing / MAC Appeal

[Submit Inquiry](#)

[Inquiry Status](#)

Check the status of a previously submitted pricing/MAC inquiry.

[Check pricing/MAC inquiry status](#) 

Pricing/MAC inquiry status will open in a new window.

Step 2: Search for your Appeal

Inquiry status

To search for the status of a previously submitted pricing inquiry, please enter the Rx information below.

Search by case number

Please provide the case number of the pricing inquiry you want to review.

Case number:
(for example: APMM-12345)

or

Search by other criteria

Please complete at least two of the following criteria for the pricing inquiry(s) you want to review.

Rx number:

Date of service:
(within the past 16 months) From: To:

Inquiry submitted:
(within the past 120 days) From: To:

NDC number:
(for example: 99999-9999-99)

Step 3: Review your Appeal

Inquiry status

[Perform another search](#)

[Print Fax cover page](#)

[Print this page](#)

Below is the status of your inquiry.

Inquiry details

Inquiry information			
Case number:	A7994		
Status:	Completed		
Notes:	Text Appeal		
Last updated:	10/04/2019 12:10 PM		
Inquiry submitted:	10/04/2019	Submitted via:	Internet
If you have not already faxed your invoice showing the acquisition cost per unit, please download and print the customized fax cover page and fax it with your invoice to our toll-free fax line, 877.246.2926.			
Pharmacy information			
Pharmacy:	Pharmacy Details		
NPI number:			
NCPDP number:			
Claim information			
Rx number of claim:			
Date of service:	10/04/2019		
Cardholder Group Number:		Quantity:	90.000
NDC number:		Unit:	Each
Product description:	ESCITALOPRAH OXALATE 10 MG	Days supply:	90
Pharmacy pricing information			
Acquisition cost per unit:	\$5.00 per		
Desired reimbursement for this prescription:	\$51.00		
Primary reason for this pricing inquiry:	Product shortage		
Contact information			
Express Scripts' response to this inquiry will be provided to the contact below.			
Name:			
Email address:			
Phone number:			