For Providers Prescribing in the Deployment Prescription Program

READY TO DELIVER THE MEDICATION YOUR PATIENTS NEED

TRICARE HOME DELIVERY PHARMACY PROGRAM

TRICARE®

EXPRESS SCRIPTS®

DELIVERING MEDICATION SAFELY AND SECURELY TO YOUR PATIENTS

When you submit prescriptions through **TRICARE Home Delivery Pharmacy Program**, you can count on greater adherence, simplicity and safety for our service men and women, both during and after deployment.

This booklet explains how to prescribe through the Deployment Prescription Program so beneficiaries can get their new prescriptions and refills through Home Delivery. Remember, it's crucial that Service Members take their medication as you prescribe, to ensure their health and mission-readiness.

Who is eligible?

Eligible Beneficiaries	Medication Supply	Copayment
Deployed Service Members	Up to 180 days	$0
TRICARE-eligible deployed contractors; civil service employees; retirees or spouses[1]	Up to 90 days	Paid by beneficiary, if applicable
Transitional Assistance Management Program (TAMP) participants[2]	Up to 90 days	Paid by beneficiary, if applicable

[1] Spouse will use the sponsor's Social Security Number

[2] If orders have been extended, TAMP participants must update their record with DEERS to reflect active status to be eligible for a 180-day supply.

Deployed contractors or civil service employees who have other health insurance (OHI) are **not eligible** for the DPP or Home Delivery. They must consult their OHI to fill prescriptions.

Creating your DPP secure server account

We recommend limiting account access to key clinical personnel to reduce the risk of fraudulent prescriptions.

Set up your account

Email **deployedprescriptionprogram@express-scripts.com** and request access to the server for prescription upload. You'll need to provide:

- Provider Name
- Rank
- Military email address
- Clinical status (for example, MD, PA, NP, RPh)
- Name of OCONUS or CONUS location

Log in to your account

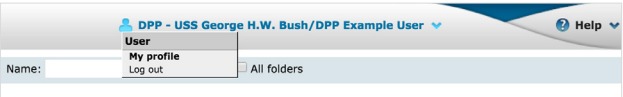
After your account is set up, Express Scripts will send you an email with your user ID and a temporary password.

1. Visit our secure server at **https://dpp.express-scripts.com**
2. Enter your user ID and temporary password from the email and click **Log in**
3. Create a new password
   - Enter your temporary password in the **Current password** box
   - Enter and confirm your new password
   - Click **Save changes**

User IDs and passwords are case-sensitive. Passwords cannot contain your user ID and must be eight characters, including an uppercase letter, lowercase letter, number and special character.

Update your profile

To change your profile settings, mouse over your user name at the top of the page and click **My profile**.



In **My Profile**, you can update:

- Name
- Email address
- Phone number
- Alternate contact information
- Date/time settings

Do NOT share accounts. Request additional accounts for appropriate personnel.

Before deployment

When a beneficiary is being processed for deployment, please complete the following three steps:

1. **Use P-MART** (Prescription Medication Analysis and Reporting Tool) to see the medication profile snapshot for deploying beneficiaries.

   For help with P-MART, call DHA PASS at 1.866.275.4732, select option 1 and ask for a data management team member. For more information, see: **https://health.mil/About-MHS/OASDHA/Defense-Health-Agency/Operations/Pharmacy-Division/Pharmacy-Analytics-Support-Section/P-MART**

2. **Write an initial prescription for up to a 180-day supply of medication to be dispensed at the pre-deployment pharmacy. For refills, use the DPP Prescription Form** on the secure server or email deployedprescriptionprogram@express-scripts.com for the form.

   The Processing Center will send the form to Express Scripts to add the medication to the beneficiary's online account.

3. If the beneficiary is deploying to an area where malaria is a concern, **prescribe a full course of anti-malarial medication** for their entire deployment, to be dispensed by the pre-deployment pharmacy.

TRICARE HOME DELIVERY PHARMACY PROGRAM
Part of the Deployment Prescription Program

Pre-Deployment Action Steps:

1. Get up to a 180-day supply of your current medication from the pre-deployment pharmacy at your location.
2. Go to **express-scripts.com/TRICARE** and create an account. Update your mailing address to your deployment APO/FPO address. Remember to use the email account you'll access while deployed.
3. Download the Express Scripts mobile app to manage your medication anytime.

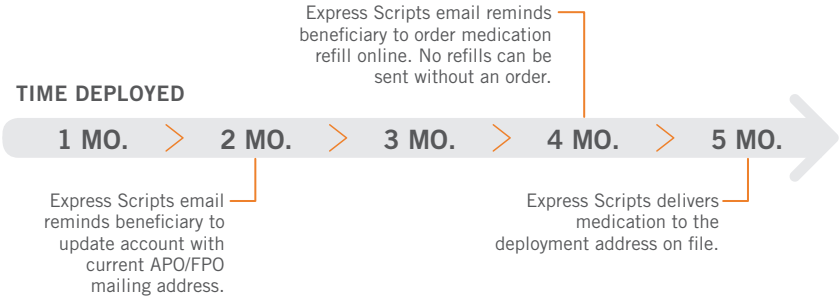
Give each beneficiary a reminder card with instructions to:

- Get up to a **180-day supply** of the prescribed medication from the pre-deployment pharmacy at their location.
- Create and sign into their account online at **express-scripts.com/TRICARE** to update their mailing address to their deployment APO/FPO address. Service Members should use the email account they plan to access while deployed.
- Order all refills from their online account or the Express Scripts® mobile app.

While deployed

Medication refills

Deployed Service Members should order refills themselves online at **express-scripts.com/TRICARE**. Here's how it works:



Missing, new or changing medications

If there's no prescription on file with Express Scripts or if you're making a change to treatment that requires a new medication:

Find the DPP prescription form in the **Support Docs** folder on the DPP secure server.

Complete the form electronically and submit to Express Scripts.*

Express Scripts fills the Rx automatically. No need for beneficiary to order.

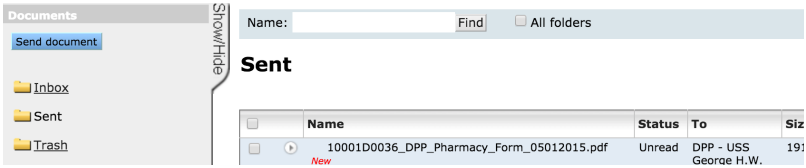
Express Scripts sends Rx to the beneficiary's deployment address on file. *See page 8 for details.*

*CII-CV prescriptions must have a handwritten signature and be mailed to Express Scripts. *See page 9 for details.*

Average shipping time to an APO/FPO address while deployed is approximately 3 to 4 weeks.

Uploading the DPP Prescription Form to the server

1. Use the **Show/Hide** tab to expand the menu and click **Send document**



2. To add documents, click **Browse,** then select the forms you'd like to upload and click **Open**
3. Confirm those documents appear in the window and click **Send**

You can review all files from the **Sent** folder in the left-hand navigation.

Helpful tips

Saving

- Save forms to your computer and include the site location in the file name
- Please use this naming convention for saved files: Deployment Location (Country, Base) – Patient Name (Last, First) – Prescriber Name (Last, First, Clinical Status)
- For CII-CV prescriptions: Fill out the form, then print, sign and mail it to Express Scripts.

Uploading

- Files can't be opened or removed after you upload them
- If you spot an error after uploading, just resubmit the form and contact our DPP team
- After you finish uploading, you may email our DPP team at **deployedprescriptionprogram@express-scripts.com** to confirm receipt or order status

Submitting prescriptions

DPP Secure Server

Providers and Processing Centers only

https://dpp.express-scripts.com

Fax to 1.877.327.8038

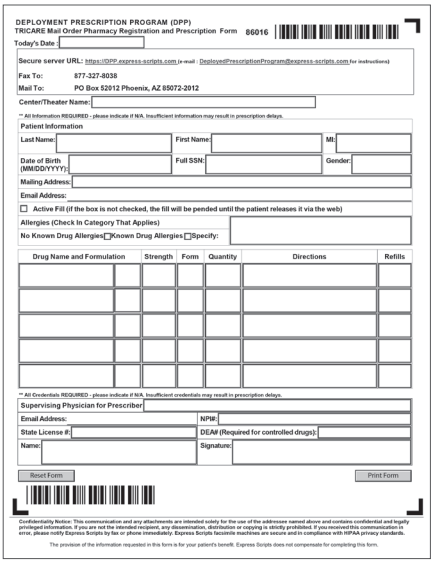
Providers and Processing Centers only

Cover sheet must indicate fax number at origin, number of pages and sender's contact information.

Mail

Required for CII prescriptions

Express Scripts
P.O. Box 52012
Phoenix, AZ 85072-2012



DEPLOYMENT PRESCRIPTION PROGRAM (DPP)
TRICARE Mail Order Pharmacy Registration and Prescription Form 86016

Today's Date :

Secure server URL: https://DPP.express-scripts.com (e-mail : DeployedPrescriptionProgram@express-scripts.com for instructions)
Fax To: 877-327-8038
Mail To: PO Box 52012 Phoenix, AZ 85072-2012

Center/Theater Name:

** All Information REQUIRED - please indicate if N/A. Insufficient information may result in prescription delays.

Patient Information

Last Name: First Name: MI:
Date of Birth (MM/DD/YYYY): Full SSN: Gender:
Mailing Address:
Email Address:

☐ Active Fill (if the box is not checked, the fill will be pended until the patient releases it via the web)

Allergies (Check In Category That Applies)
No Known Drug Allergies ☐ Known Drug Allergies ☐ Specify:

Drug Name and Formulation		Strength	Form	Quantity	Directions	Refills

** All Credentials REQUIRED - please indicate if N/A. Insufficient credentials may result in prescription delays.

Supervising Physician for Prescriber
Email Address: NPI#:
State License #: DEA# (Required for controlled drugs):
Name: Signature:

Reset Form Print Form

Confidentiality Notice: This communication and any attachments are intended solely for the use of the addressee named above and contains confidential and legally privileged information. If you are not the intended recipient, any dissemination, distribution or copying is strictly prohibited. If you received this communication in error, please notify Express Scripts by fax or phone immediately. Express Scripts facsimile machines are secure and in compliance with HIPAA privacy standards.

The provision of the information requested in this form is for your patient's benefit. Express Scripts does not compensate for completing this form.

To help ensure compliance with HIPAA, do NOT submit prescriptions via email

Special exceptions

Controlled medication (CII-CV)

May be authorized for up to 90-day supply only, with no refills.

What's required:

- Provider's valid personal DEA number (facility DEA numbers are NOT accepted)
- Provider's handwritten signature (photocopied or digitally signed prescriptions are NOT accepted)
- Mailed paper prescription (CII)
- May be faxed or scanned to Express Scripts (CIII-CV)

For all controlled medications, if errors are identified, a new prescription may be required

Over-the-counter (OTC) medication

Most OTC medications are NOT available through Home Delivery except for **the following generic drugs, if prescribed:**

- Cetirizine (generic for Zyrtec®)
- Fexofenadine (generic for Allegra®)
- Loratadine (generic for Claritin®)
- Omeprazole (generic for Prilosec OTC®)

Refrigerated packaging

Medications requiring refrigerated packaging will NOT be shipped to APO/FPO addresses.

CENTCOM waivers

Prescriptions for medications that are typically non-deployable will NOT be honored UNLESS they meet one of these conditions:

- Provider submits a copy of an approved CENTCOM waiver
- Medical or pharmacy personnel can confirm that a CENTCOM waiver is approved for the beneficiary and medication or that the prescription does NOT require a CENTCOM waiver
- For beneficiaries deployed to regions other than CENTCOM, the prescription must meet the requirements for that command or have a waiver for non-deployable medication.

For more information on CENTCOM waivers and formulary, go to **https://www.express-scripts.com/TRICARE/tools/deployedrx.shtml**

Psychotropic medication

Up to a 180-day supply may be dispensed at the pre-deployment processing center. Beneficiaries must see a provider in theater for all follow-up care and prescription renewals to ensure close monitoring. Home Delivery prescriptions will NOT be accepted from pre-deployment sites.

Smoking cessation

Medication is covered by TRICARE. However, per CENTCOM policy, Chantix® is a non-deployable medication and requires a waiver.

For more information on these exceptions, visit **express-scripts.com/TRICARE,** go to **Tools** in the top navigation bar and select **Deployment Prescription Program.**

Reasons for delay

The following issues may cause a processing delay for Home Delivery:

- The beneficiary is ineligible for TRICARE coverage
- We have incomplete, illegible or invalid prescription information, including:
  - Issue date (post-dated prescriptions are not accepted)
  - Drug name, strength or form
  - Missing quantity
  - Missing provider signature on controlled substances
  - CII prescriptions submitted electronically, by fax, scan or upload
  - Medicines requested are excluded from the TRICARE pharmacy benefit
  - Dosage prescribed is "use as directed"

Contact us

Express Scripts ensures medications are delivered safely and securely to Service Members so they can stay focused on their mission. If you have any questions, please visit our website or contact us:

express-scripts.com/TRICARE

deployedprescriptionprogram@express-scripts.com

1.855.215.4488
toll free, 24 hours a day, 7 days a week

Express Scripts
P.O. Box 52012
Phoenix, AZ 85072-2012

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