



**AmeriHealth Caritas**<sup>™</sup>  
District of Columbia

**To:** AmeriHealth Caritas DC Providers  
**Date:** November 6, 2024  
**Subject:** Pharmacy Electronic Prior Authorization Changes

Dear Provider:

AmeriHealth Caritas District of Columbia (DC) is implementing changes to the process for pharmacy electronic prior authorization requests.

Effective December 1, 2024, the online PerformRX Prior Authorization Request Form, located at [www.amerhealthcaritasdc.com/provider/resources/pharmacy-prior-auth-forms.aspx](http://www.amerhealthcaritasdc.com/provider/resources/pharmacy-prior-auth-forms.aspx), will be inactive. Please remove this form from your records.

**Instead, providers should submit electronic prior authorization requests through their Electronic Health Record (EHR) tool software, or through any of the following online portals:**

- **CoverMyMeds** ([www.covermymeds.health](http://www.covermymeds.health))
- **SureScripts** (<https://providerportal.surescripts.net/ProviderPortal/login>)

The AmeriHealth Caritas DC Pharmacy Prior Authorization Forms web page ([www.amerhealthcaritasdc.com/provider/resources/pharmacy-prior-auth-forms.aspx](http://www.amerhealthcaritasdc.com/provider/resources/pharmacy-prior-auth-forms.aspx)) will be updated accordingly.

If you have questions about this communication, please contact your AmeriHealth Caritas DC Provider Account Executive or Provider Services at 202-408-2237.

Sincerely,  
AmeriHealth Caritas DC Pharmacy Team