



# SPECIALTY MEDICATION QUICK START GUIDE

- ⚡ Enrollment Destinations
- ⚡ Getting Started
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- ⚡ Creating Patient Profile
- ⚡ Starting An Enrollment
- ⚡ Real Time Benefits Check



- ⚡ Remote Patient Authorization
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# ENROLLMENT DESTINATIONS

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## Specialty Pharmacy

Specialty drugs that are billed through pharmacy benefits often have to be sent to a specialty pharmacy. Specialty pharmacies dispense the medication to the patient and may provide additional services to support the patient.



## Hub Services

Manufacturers provide Hub Services for patients on their branded medications. These can include benefits verification, reimbursement support, nutrition support, etc.



## Patient Assistance Programs

Patient Assistance Programs (PAPs) are programs that are provided by manufacturers to financially help patients afford medications. These financial assistance programs may cover medications in full or part.



## Foundation Funds

Nonprofit foundations, often 501(c)3 organizations, that collect donations for the purpose of providing financial assistance to patients. Eligibility requirements must be met, but larger populations have access to these programs.

# GETTING STARTED

**1**

The screenshot shows two overlapping pages from the RxLightning website. The background page is the 'Registration' form, which includes fields for Email, Password, Confirm Password, First Name, Last Name, Organization Name, Organization Type, and Referred By. It also has a 'REGISTER' button at the bottom. The foreground page is the 'Sign in' page, which includes an Email field (with 'RxLUser@email.com' entered), a Password field, a 'LOG IN' button, and a link to 'Reset your password'.

**Register Your Account or Log In**

**2**

Two blue buttons are shown. The top button has a heart icon and the text 'REGISTER PRESCRIBER'. The bottom button has a person icon and the text 'REGISTER PATIENT'.

**Register Your Prescribers and Patients**

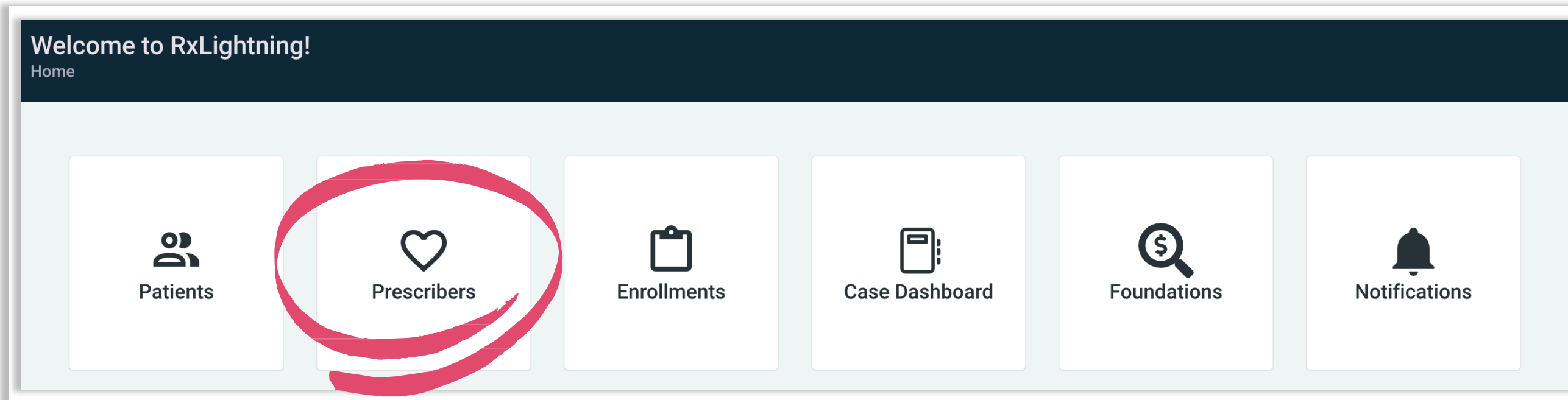
**3**

The screenshot shows the 'Enrollments' page with the heading 'Start A New Enrollment'. Below the heading is a 'Start a New Enrollment' button. Underneath, there are five dropdown menus: 'Patient \*' (Saint Croix, Joseph), 'Prescriber \*' (Prescriber, Bolt (17109672...)), 'Drug \*' (Humira (Adalimumab)), 'Destination \*' (Manufacturer Support Pro...), and 'Category \*' (Dermatology - Pediatric). A 'START NOW' button is located to the right of the dropdowns.

**Begin Submitting Enrollments**

# REGISTERING A PROVIDER

Welcome to RxLightning!  
Home




The dashboard features six main navigation cards: Patients, Prescribers, Enrollments, Case Dashboard, Foundations, and Notifications. The 'Prescribers' card, which includes a heart icon, is circled in red to indicate the next step in the registration process.

Prescriber Search

**REGISTER PRESCRIBER**

NPI:  First Name: JOHN Last Name: SMITH State: Pennsylvania

Search for your prescriber by NPI number, or Name & State

NPI	FIRST NAME	LAST NAME	GENDER	CITY	STATE	POSTAL CODE	VERIFIED	ACTIONS
1360438059	JOHN	SMITH	M	SOMEWHERE	PA	15555		

Rows per page: 10 1-1 of 1

Click the heart icon to initiate the prescriber registration process

Send Verification Request

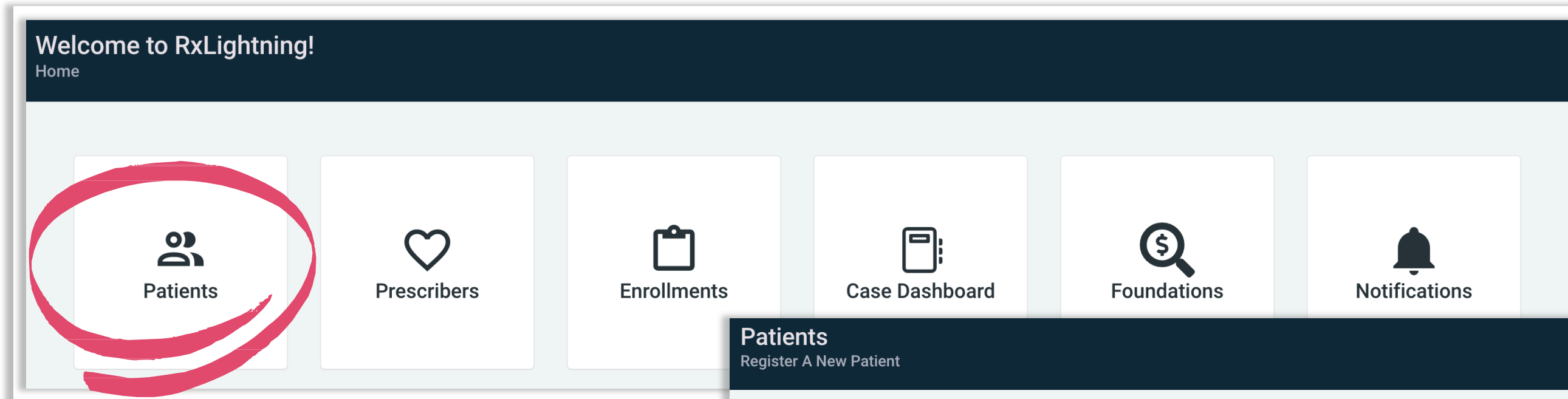
Please enter an email address to continue verification.

I am this prescriber

I am initiating the process for someone else

Email must be unique

# CREATING A PATIENT PROFILE



 REGISTER PATIENT

Begin adding patient information to each tab

Patients  
Register A New Patient [← BACK TO PATIENT LIST](#)

PATIENT INFORMATION | EMERGENCY CONTACTS | CAREGIVERS | CLINICAL HISTORY | INSURANCE INFORMATION

**Basic**

First Name \* Middle Name Last Name \*

Date Of Birth \* mm/dd/yyyy Medical Record Number SSN

Gender \*  Male  Female  Patient consents to communications

**Addresses**

Line 1 \* Line 2

City State Postal Code \*

Physical  Mailing

[+ ADD ADDRESS](#)

**Phone Numbers**

[+ ADD PHONE NUMBER](#)

**Email Addresses**

[+ ADD EMAIL ADDRESS](#)

CANCEL [SAVE PATIENT](#)

# START AN ENROLLMENT with RTBC

**Start a New Enrollment**

Real Time Benefits Check with Pricing Transparency

Patient \*  
 McQueen, Lightning

Prescriber \*  
 HUDSON, Doc (1010101010)

Drug \*  
 Humira (Adalimumab)

Destination \*  
 Centerwell Specialty Pharmacy

Category \*  
 Dermatology

START NOW

Prescriber Address \*  
 2020 Car Street

Quantity \*  
 28

Unit of Measure \*  
 28 Day Tablet

Days Supply \*  
 28

Check this box to access RTBC information once the enrollment is started

Once all information is entered, click here

Patient	Prescriber	Drug	Destination	Category
Select the patient you wish to prescribe for	Select corresponding prescriber for patient	Type in the medication you wish to prescribe for <a href="#">Add additional drug information for Real Time Benefits Check</a> <small>(Quantity, Unit of Measure, Day Supply, etc.)</small>	Select where you want the form to go (E.g., Hub, PAP, Specialty Pharmacy)	The intended therapeutic area for which the drug is prescribed (E.g., Dermatology, Oncology, etc.)

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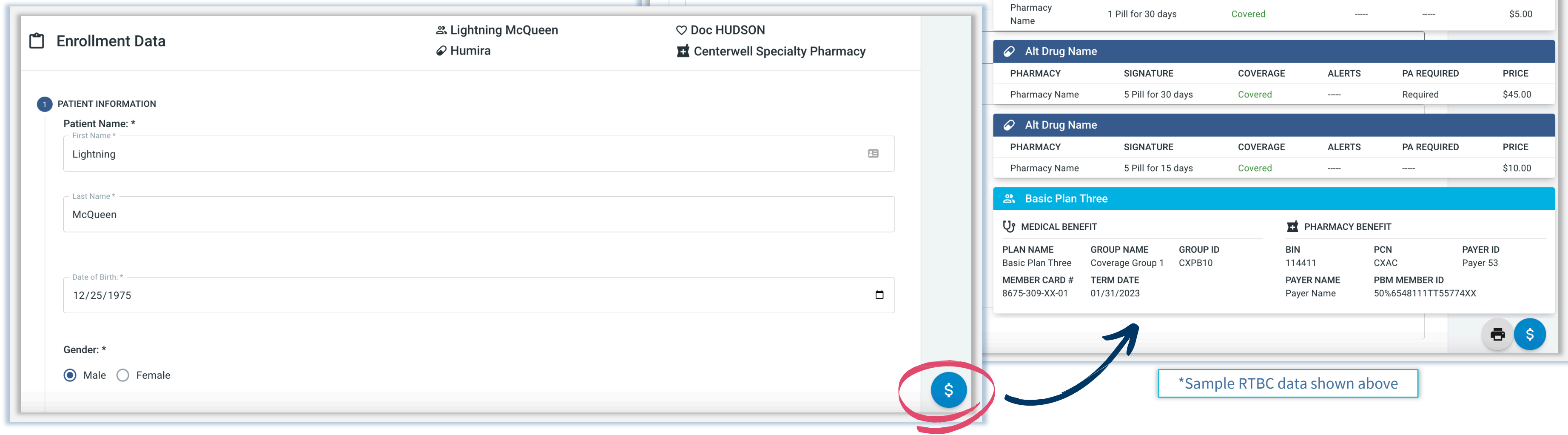
RxLightning.com

support@rxlightning.com

855-485-0579

# REAL TIME BENEFIT CHECK (RTBC)

Click on the  to populate RTBC data



The screenshot displays the RTBC interface. On the left, the 'Enrollment Data' form includes patient information for Lightning McQueen, Doc HUDSON, and Centerwell Specialty Pharmacy. The main area shows drug coverage details for Humira and two alternative drug names. At the bottom right, a 'Basic Plan Three' section provides medical and pharmacy benefit details. A red circle highlights a dollar sign icon in the bottom right corner, with an arrow pointing to a text box that reads '\*Sample RTBC data shown above'.

PHARMACY	SIGNATURE	COVERAGE	ALERTS	PA REQUIRED	PRICE
Centerwell	28.00000 Pills for 30 days	Covered With Restrictions	----	Required	\$10.00
Pharmacy Name	30 Pill for 30 days	Covered	----	----	\$5.00
Pharmacy Name	1 Pill for 30 days	Covered	----	----	\$5.00

PHARMACY	SIGNATURE	COVERAGE	ALERTS	PA REQUIRED	PRICE
Pharmacy Name	5 Pill for 30 days	Covered	----	Required	\$45.00

PHARMACY	SIGNATURE	COVERAGE	ALERTS	PA REQUIRED	PRICE
Pharmacy Name	5 Pill for 15 days	Covered	----	----	\$10.00

PLAN NAME	GROUP NAME	GROUP ID	BIN	PCN	PAYER ID
Basic Plan Three	Coverage Group 1	CXPB10	114411	CXAC	Payer 53

MEMBER CARD #	TERM DATE	PAYER NAME	PBM MEMBER ID
8675-309-XX-01	01/31/2023	Payer Name	50%6548111TT55774XX

# REMOTE PATIENT AUTHORIZATION

Please let your patients know to expect a message from RxLightning about the patient consent form.

## 1 Answer the questions on the enrollment

In Section 10 Patient Authorization, select **NO** to Is the Patient in the Office?

The screenshot displays a two-step enrollment form. Step 1, titled '10 PATIENT AUTHORIZATION', asks 'Is the patient in the office? \*' with radio buttons for 'Yes' and 'No'. Below this question is a note: 'Select 'no' if you'd like the patient to complete this separately, the patient wants to do it at home, or the patient wants to take more time to complete it.' Step 2, titled '2 Select email or text message', asks 'How would you like us to capture the patient's authorization information? \*' with radio buttons for 'Text Messaging' (selected), 'Email', and 'Print, mail to patient, when complete upload to send.'. Below this is a text input field for 'Enter the Patient's Cell Phone Number:' with a placeholder 'Phone number \*'. A note below the input field states: 'The patient will be notified via email or text when you submit this enrollment. Once the patient consent is completed by the patient, the entire enrollment will automatically be sent to its chosen destination. Select 'no' if you'd like the patient to complete this separately, the patient wants to do it at home, or the patient wants to take more time to complete it.' At the bottom of the form, there are two buttons: '← PREVIOUS STEP' and 'SAVE DRAFT'. The 'SUBMIT DOCUMENT >' button is circled in red.

## 2 Select email or text message

Enter the patient's email address or phone number. Complete the enrollment and click **SUBMIT DOCUMENT**



# REMOTE PATIENT AUTHORIZATION

PATIENT VIEW

## Identity Verification

When your patient opens the link in the email or text message, they will see this HIPAA Compliant Identity Verification

The screenshot shows the 'IDENTITY VERIFICATION' form with the RxLightning logo at the top. Below the logo, the text reads: 'All personal data must EXACTLY match the information used on the enrollment. Please contact the patient's healthcare provider with any questions.' The form contains three input fields: 'PATIENT'S LAST NAME' (a text box), 'PATIENT'S DATE OF BIRTH' (a date picker showing 'mm/dd/yyyy'), and 'PATIENT'S GENDER' (radio buttons for 'Male' and 'Female').

## Form Completion

Once their identity is confirmed, your patient will complete the questions required for the patient assistance program. This includes all program-specific small print regarding patient consent and assistance funding

The screenshot shows the 'Form Completion' page with the RxLightning logo at the top. The page title is 'Ibrance' and it is 'Prescribed by Doc HUDSON'. The form contains several sections: 'Best Time to Contact' with three radio button options: 'Morning', 'Afternoon', and 'Evening'; two permission checkboxes: 'I give permission to Pfizer Oncology Together to contact and leavemessages for me about patient services and enrollment status.' and 'I give permission to Pfizer Oncology Together to communicatedirectly with my caregiver on my behalf.'; and a 'Financial Information' section with a note: 'This information is required to search for alternate funding support and verify eligibility for the Pfizer Patient Assistance Program, as appropriate. Do not provide financial information if you are only applying for the Pfizer Oncology Together Co-Pay Savings Program for Injectables.' At the bottom, there is a text box for 'Total Number of People Within Household (including applicant)'.

Once the patient hits **SUBMIT**, the enrollment automatically sends to the desired destination

# HOW TO UPDATE STATUS

- View This Enrollment
- Download Enrollment Document
- Fax Document To Additional Recipient
- Duplicate This Enrollment
- Update Enrollment Status
- View Enrollment Status History

From the action menu on the Enrollments page, choose **Update Enrollment Status**

## Specialty Pharmacy

**Update Enrollment Status**

NewPatient Testing    AARON STEIN  
Retevmo    Centerwell Specialty Pharmacy

Status \*  
Shipped

Shipped  
Pending  
Cancelled  
Triaged

**Update Enrollment Status**

NewPatient Testing    AARON STEIN  
Retevmo    Centerwell Specialty Pharmacy

Status \*  
Triaged

Substatus \*  
Prescription Transferred  
Provider Notified  
Patient notified  
Triage call to next SP completed

## HUB and PAP

**Update Enrollment Status**

Jeff Jordan    JOHN SMITH  
Avastin    Hub and PAP

HUB    PAP

Pending  
Approved  
Denied  
Appeal  
Rx Resolved  
Spend Down  
Renewal Spend Down  
Shipped

**Update Enrollment Status**

Jeff Jordan    JOHN SMITH  
Avastin    Hub and PAP

HUB    PAP

Status \*  
Denied

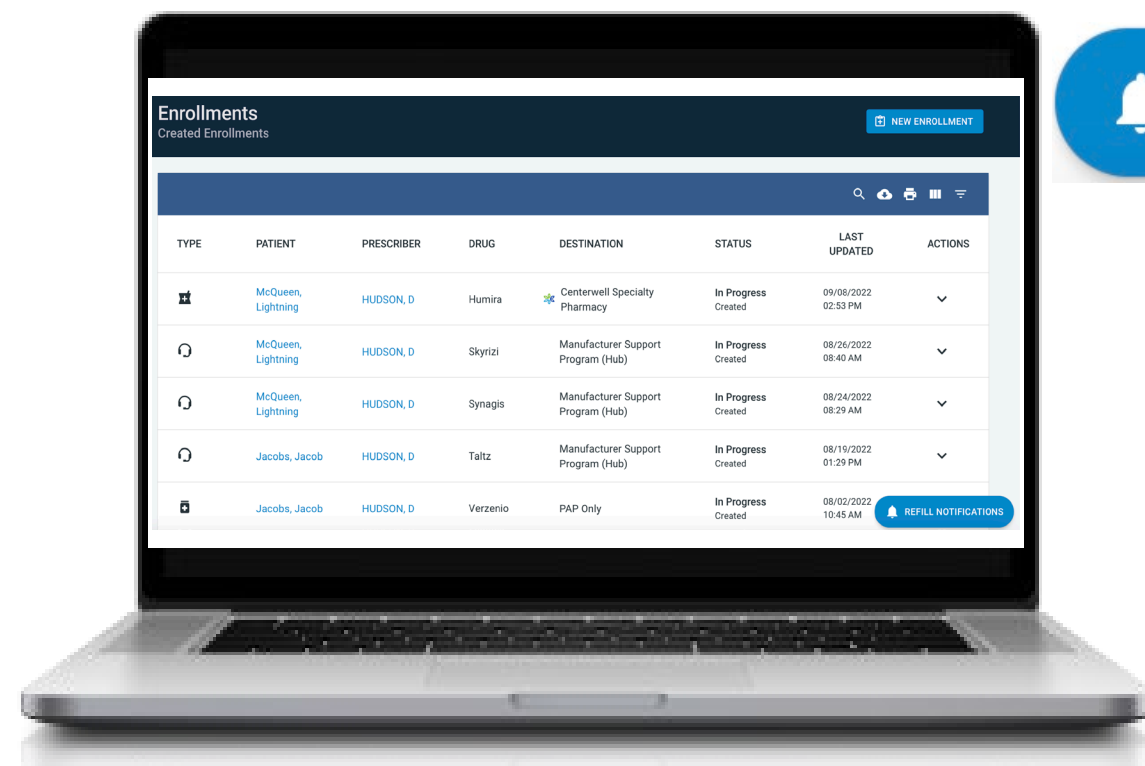
Substatus \*  
Income  
Unable to meet Spend Down  
LIS Patient  
Other

## Select a status for the enrollment

Each status has its own set of **sub-statuses** to fully describe where the prescription is in the fulfillment process and if there are any points for clarification.

# REFILL REMINDERS

Refill Reminders Are Displayed within the Portal, but can also be received Via Email or Text



REFILL NOTIFICATIONS

In Portal Refill Notifications

## 6 PRESCRIPTION INFORMATION

Would you like a reminder to refill this order request?

Yes  No

What date would you like to be reminded? \*

mm/dd/yyyy

You will receive a reminder on the first login on or after the date selected.

Check the box if you would like to be reminded in any of the following additional ways:

Email

Text

Choose to also receive an Email or Text Reminder

# FIND FOUNDATION FUNDING

AND ENROLL YOUR PATIENT

Welcome to RxLightning!  
Home

Patients

Prescribers

Enrollments

Case Dashboard

**Foundations**

Notifications

## Foundation Funds

Opportunities for Additional Assistance

**Search for Foundational Funds**

acute

FUND NAME	STATUS	FOUNDATIONS
Acute Lymphoblastic Leukemia	Closed	GoodDay
Acute Myeloid Leukemia	Expand to view status	HealthWell, PAN Foundation, TAF

HEALTHWELL PAN FOUNDATION TAF

STATUS	PROGRAM NAME	FUND TYPE
Open	Acute Myeloid Leukemia	Copay/Premium

**ELIGIBILITY CRITERIA**  
Under this fund, HealthWell can assist with premium costs. Medicare supplemental policies can help with cost shares related to many aspects of your health care. Using a HealthWell grant to cover premiums may be a better option than treatment-specific cost shares. You are being treated for Acute Myeloid Leukemia. You have insurance and it covers your medication. Your income falls within our guidelines. You are receiving treatment in the United States.

**MEDICATIONS COVERED**  
Adriamycin, Azacitidine, Cladribine, Clofarabine, Clolar, Cyclophosphamide, Cycophosphamide Intra Sol, Cytarabine, Cytoxan, Dacogen, Daunorubicin, Daurismo, Decitabine, Depocyt, Dexamet/nacl, Dexamethasone, Dexamethasone Sodium Phosphate, Dexpak, Doubledex, Doxorubicin, Droxia, Enasidenib, Etopophos, Etoposide, Fludarabine, Gemtuzumab Ozogamicin, Glasdegib, Hydrea, Hydroxyurea, Idamycin Pfs, Idarubicin Hydrochloride, Idhifa, Ivosidenib, Jakafi, Locort, Maxidex, Methotrexate, Mitoxantron, Mylotarg, Neosar, Nexavar, Onureg, Otrexup, Ozurdex, Rasuvo, Ready Dexame, Rydapt, Tabloid, Thioguanine, Tibsovo

**HealthWell Contact Information**

8006758416

8002827692

<https://www.healthwellfoundation.org/disease-funds/>

**START ENROLLMENT**

RxLIGHTNING

Enrollments  
Start A New Enrollment

Start a New Enrollment

Patient\*  
Prescriber\*  
Drug\*  
Destination\*  
Category\*







Patient, Name  
Prescriber, Name  
Jakafi (Ruxolitinib)  
Healthwell  
Foundation

**START NOW**

**Enroll your patient in the selected fund**
















# ADDITIONAL FEATURES

-  Open the current enrollment
-  Download a PDF of the completed enrollment that was sent to the selected destination
-  Enter the fax number of an additional recipient
-  Duplicate a completed enrollment, update any important information, and submit as a new enrollment quickly and easily
-  Update the status of this enrollment, each status contains it's own set of sub-statuses
-  View the status history of the enrollment as it is worked by the destination

RxLIGHTNING

Enrollments

Submitted Enrollments

TYPE	PATIENT	PRESCRIBER	DRUG	DESTINATION	STATUS	LAST UPDATED	ACTIONS
	<a href="#">McQueen, Lightning</a>	<a href="#">STEIN, A</a>	Humira	Manufacturer Support Program (Hub)	Complete Submitted	09/07/2022 06:06 PM	^
	<a href="#">McQueen, Lightning</a>	<a href="#">STEIN, A</a>	Retevmo	 Centerwell Specialty Pharmacy	Complete Submitted 	09/07/2022 06:05 PM	<ul style="list-style-type: none"> <li> View This Enrollment</li> <li> Download Enrollment Document</li> <li> Fax Document To Additional Recipient</li> <li> Duplicate This Enrollment</li> <li> Update Enrollment Status</li> <li> View Enrollment Status History</li> </ul>
	<a href="#">Jacobs, Jacob</a>	<a href="#">STEIN, A</a>	Cosentyx	Panther	Complete Submitted 	09/07/2022 06:04 PM	
	<a href="#">Miller, Arthur</a>	<a href="#">STEIN, A</a>	Galafold	Manufacturer Support Program (Hub)	Complete Submitted	09/07/2022 06:02 PM	

# FREQUENTLY ASKED QUESTIONS

## ⚡ WHY SHOULD I ADD AN EXTRA “STEP” IN THE MIX?

RxLightning replaces some of the steps in your current process. You no longer have to spend time looking for forms. RxLightning has the most up-to-date forms for your convenience. It will also get you away from manually tracking patients on paper or in excel. RxLightning makes it simple and easy.

## ⚡ CAN I SEE ALL THE PROVIDERS ENROLLMENTS IN ONE PLACE

Yes! The workflow puts all enrollments on the same page. There are filter and search functions to help you find exactly what you’re looking for.

## ⚡ WHAT IF I NEED THE DOCUMENT IN MY EMR SYSTEM FOR THE PATIENT?

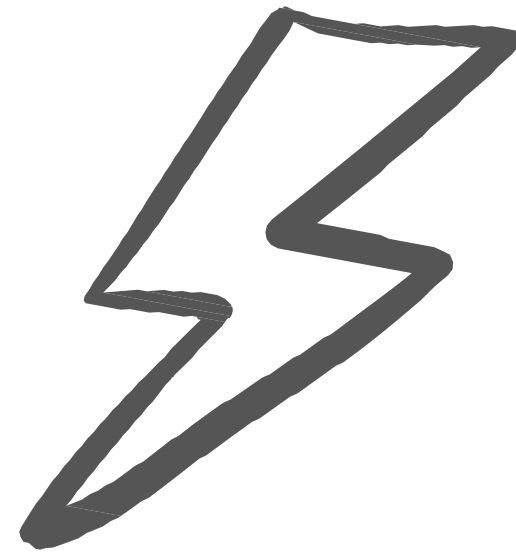
Each completed enrollment is available for you to download as a PDF. This will allow you to save the completed enrollment into the patient record on your EMR or print the PDF and store in your patient’s paper chart.

## ⚡ HOW WILL I KNOW IF MY ENROLLMENT WENT THROUGH?

Once the enrollment is completed, the status will change to “**Complete Submitted**”

# QUESTIONS?

## WE'RE HERE TO HELP!



RxLightning  
[Access4MePortal.com](https://Access4MePortal.com)  
[support@rxlightning.com](mailto:support@rxlightning.com)  
855-485-0579