



JOHNSTONE'S JOURNAL is published monthly, and designed to provide topical information of interest not only to plan administrators, but to all employees who enjoy coverage under the benefit plan. Feel free to make copies, and use as a payroll staffer.

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Prescription Drug Cards—FAQs

Submitting claims for your prescriptions

Prescription drugs coverage is the most visible and highly used component of extended health care (EHC) plans, making up 60%-80% of claims costs. We're all familiar with how claims reimbursement works—you pay for your prescription, complete a claim form and mail it to the insurer, and then wait for your reimbursement cheque.

Many EHC plans now include a pharmacy drug card. Although there can be a cost to implement these cards, they offer convenience, saving employees time, as they no longer have to submit claims by mail. Two cards are generally available:

Deferred Drug Card—you pay the full cost of the prescription, but your pharmacist submits the claim electronically to the insurer. You are then reimbursed by either cheque or direct deposit.

Pay Direct Drug Card—you only pay the cost not covered by your EHC plan at the point of sale. Your pharmacist submits your claim electronically and is reimbursed by the insurer.

With either drug card option, your claim is processed on the spot and you know immediately what your EHC plan covers and what it doesn't.

FAQs: claiming complications

This convenient service usually works smoothly. Until it doesn't. Fortunately, once problems are identified, they are usually easy to fix.

My pharmacist told me my drug card doesn't work—out-of-date or incorrect information can be the issue. Claims processing systems rely on accurate name, birth date and relationship codes. They are used as unique identifiers, and if entered incorrectly either at the pharmacy or with your insurer, the system will decline payment of the claim. Each member of your family is identified with a **relationship** or **dependent number**. The number keyed must match the birth date for the person claiming the prescription.

I'm paying more for my prescription—This type of problem can be caused by changes in the plan. Most plans that include drug cards also limit reimbursement to the lowest-cost generic (see *Journal* [March 2012](#)). In addition, insurers limit the cost of prescriptions based on a reasonable and customary pricing file (see *Journal* [November 2010](#)). Insurers are making these changes in an effort to reduce the total cost of the prescription for them and you. Speak to your pharmacist who can provide your best options.

My spouse and dependent children's claims are no longer accepted at the pharmacy—when both spouses have coverage through their employers' plans (known as [co-ordination of benefits](#)), claims must first be paid under the employee's own plan. For dependent children, claims are paid first under the plan of the parent with the birthday that is earlier in the year. You can claim any outstanding amount under the other plan but often it must be done the old fashioned way—by mail. Pay the outstanding balance and claim for reimbursement.

Although pharmacists are very busy, if you are having problems with your drug card, ask the pharmacy to contact the insurer. They often have a direct line to resolve claims issues. In the end, you may have to pay for the prescription and submit a claim yourself while you clear up the problem.

What you'll see on your card

Most insurers issue one or two cards showing the employee's name only. Other insurers issue cards for each covered family member. Whichever card they issue, you simply present it to pay for your prescription drugs.

Report lost or stolen cards immediately to ensure fraudulent claims are not submitted under your name. Many insurers allow you to print a new card from their website, some insurers have drug card apps that you can download on your smart phone. Check out your insurer's website (all linked through www.jbenefits.com) for latest, or call us.