

Fee caps

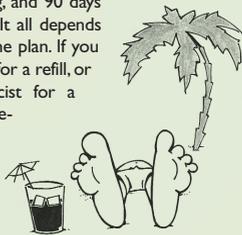
Your drug plan may not pay the whole amount of the pharmacist's professional fee charged on every prescription. It could be capped, and then you would pay the difference between the capped fee and what the pharmacy usually charges.

Special or prior authorization

Some drugs are covered in certain circumstances only. For example, a drug that can be used to treat several conditions may be covered for only one of those conditions. Your doctor will need to fill out a special authorization form, available from the insurance company, for these types of prescriptions before your plan will cover the drug.

Days supply or limited supply

A drug plan may pay for 30 days' worth of one drug, and 90 days' worth of another. It all depends on the drug and the plan. If you come in too early for a refill, or ask your pharmacist for a larger quantity because you are planning to go away for a period of time (like on vacation), you might have to get special authorization. Call your insurance company for more information.



Trial prescriptions

For certain drugs, some drug plans require the pharmacist to dispense a trial supply of seven or 10 days' worth of the drug. After that time, you, your pharmacist and your physician decide whether to continue with it, or try something else.

Remember, it's important to know enough about your drug plan in order for you and your family to enjoy its full benefits. If you have questions or concerns, check your benefits booklet, contact your insurance company or talk to someone at the company that provides your plan.



Get the facts!

Produced in cooperation with the:
Canadian Stakeholder Steering Committee on Drug Plans (pharmacy organizations, drug plan insurers, claims processors and employers—working together to help you understand your benefit plan).

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Life is our life's work



It's your drug plan



Get the facts!

Thanks to your drug plan, you are able to get prescription medications that you would otherwise have to pay for out of your own pocket. But to get the most out of this benefit, it's important to know enough about how your drug plan works. This will prevent delays at the pharmacy.

The company (or organization) where you work, or where your spouse or parent works, provides your drug plan. If you're retired or on social assistance, your provincial government is probably helping you pay for your drugs.

Companies with drug plans hire insurance companies to manage their plans. These insurers tell your pharmacy, usually by computer, if your prescription is covered by your drug plan. Keep in mind that pharmacists only know what the computer tells them about your drug plan—they don't know the details. Read on to find

out what you can do to help things go smoothly in the pharmacy.



Show your card

Show your personal drug plan card (or certificate) right at the beginning, when you hand in your prescription. This is especially important when you're using a pharmacy for the first time.



If you wait until after the prescription is filled, the pharmacist will have to re-enter information in the computer, and you'll end up waiting longer.

Know your drug plan

If there's a problem at the pharmacy that can't be fixed right away (for instance, your computer file has the wrong birth date), or you don't understand how your plan works, there are several things you can do. First of all, get a copy of the benefits booklet from your company. If that doesn't tell you what you need to know, contact the insurance company that handles your drug plan—its toll-free number is probably printed on your drug plan card. Or you can talk to someone at the company that provides your plan (larger companies may have a benefits administrator, who focuses on things to do with benefit plans).

Keep up-to-date

Let's say you get a new drug plan card—with a new identification number, for instance. It's up to you to tell the pharmacist. This goes for everyone in your family, since pharmacies must keep separate files for each family member. Again, do this before the prescription is filled.

If you change your last name, have a baby, or

there are new dependents, you need to tell the company that's providing your drug plan. And if you're a student in college or university, you (or your parent) may need to contact the company at the start of every school year to ensure your coverage continues.



Dealing with rejection

There are various reasons why some drug plans will not cover a prescription. There may be another drug that will work as well and that is covered (in which case your doctor can write you a new prescription). You can contact your insurance company for more information. Or, if you want the original prescription, you always have the option of paying for it yourself.

How do drug plans work? Here are some of the terms you're most likely to come across:

Co-pays, coinsurance & deductibles

Some drug plans require that you pay part of the cost of each prescription. This is called a co-pay or coinsurance. It can be the same amount each time, like \$5, or it can be a percentage of the total cost, such as 20%.

Some plans require a deductible every year. For instance, you might have to pay for the first \$100 of prescriptions before your coverage kicks in.