

Ask the Welfare Fund – March 2010

Question: I am an Assistant Principal, and recently came down with a severe cold. My doctor prescribed an antibiotic and a decongestant. I insisted that I receive a prescription for a generic antibiotic, but it still cost me \$ 35 for a week's supply. Isn't this a mistake?

Answer: First, I thank you for insisting on a generic medication where possible. Generics save both you and the fund a great deal of money. Your antibiotic purchase was likely the first purchase at a local pharmacy this year. As such, it is subjected to the annual \$ 50 per person, \$ 150 per family deductible. Your decongestant purchase likely used the balance of the deductible, and you paid a percentage of the remaining cost for that medication. The good news is that you have now satisfied your deductible and, should you need an antibiotic later in the year, you will only pay the applicable co-pay percentage.

Question: I am a retired Principal who is not yet Medicare eligible. I sent my four quarterly reports from Express Scripts as soon as I received the last one in mid January. I still haven't received my check. Why does it take so long to get reimbursed, and when will I get my check?

Answer: The answer to your question is not short. When we first started reimbursing prescription drug co-payments for retirees, we had no alternative but to process each claim manually. This is a very time-intensive process, and required us to hire several temporary workers, at great expense to the fund. Several years ago, in an effort to streamline the fund, we entered into an agreement with the City and GHI to get the prescription history for our retirees electronically. We developed computer programs to verify the data, and generate claims automatically. We take the reports you submit, in the order they have been received, enter your id number into the computer, and the program automatically generates a claim and prints a worksheet. If you are a member of the CSA Retiree Chapter, it also automatically generates your supplemental chapter claim. Using this system, we are able to process in three weeks, with existing staff, what used to take five months and several temporary staff to process. Since this is based on getting the data from GHI, we are totally dependent upon them to get us the data. We have learned to ask them to wait until February to send us the data, since one year they did it in mid January and forgot to give us prescriptions from the last two weeks of December. We expect the data by the end of February, and plan to have all reimbursements completed by the end of March.

Special Note: Thank you to all retirees who read the guidelines for submitting prescription co-payments for reimbursement. Our staff is processing the claims much faster and more efficiently than in past years. They have asked me to remind those submitting claims to put either the members social security number or welfare fund id number (the number beginning with "71") on all submissions to speed up processing. Also, for those who are Medicare eligible and in the GHI enhanced Part D plan, please do not send your end-of-year reports in unless you exceeded the out of pocket amount of \$ 4,350 in 2009. We will only have to return it to you with an explanation, which only adds to our administrative costs.