# Caremark.com – Prescription Reimbursement Claims (Commercial Clients)

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**Description**: Explains the application available to submit manual claims for prescriptions for **Commercial and Exchange clients**.

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| Important Notes |

**Icon - Important Information When educating members about the Paper Claims process, read the following disclaimer: Icon - Conversation**The submission of a paper claim does not ensure reimbursement under the prescription benefit plan.

**TAT (Turn Around Time):**  Digital Claims submitted online allow 14 business days to be processed. If the claim is processed and a reimbursement check is not received within the TAT, refer to [Compass - Refund Stop Payment Check Reissue (061420)](https://thesource.cvshealth.com/nuxeo/thesource/#!/view?docid=f6f8404c-3eff-42f0-82d5-ffe3b5fa1b5f). If claim is found in the system and it has been **more than** 45 business days since the claim was received by CVS Caremark, and member has not received reimbursement, then refer to [Compass - Identifying Paper Claims (050034)](https://thesource.cvshealth.com/nuxeo/thesource/#!/view?docid=c281dde6-a86e-451a-8828-9f2b98c17bb9). Only reimbursement claims submitted using the online tool can be viewed or tracked on Caremark.com/Mobile App.

**Timeframes for submission**s: Timeframes for submission of a Paper Claim are Client specific. Refer to the CIF in the Paper Claim Section.

**Client Exceptions:** There are clients that do not allow their members to submit paper claims online; they must mail a Prescription Reimbursement Claim Form for any reimbursements to be received. Below is a list of clients that have opted out or do not allow paper claims; please remember to always check the client’s CIF.

* STNRX – State of Tennessee (Opted Out)
* ZBA75 – Bank America Corporation (Opted Out)
* Medicaid Clients
* Discount Card and Cash Card carriers
* Aetna (Commercial and Med-D)
* CarelonRx (Commercial and Med-D)
* Clients who process/handle their own Direct Member Reimbursements (DMR)
* Clients who do not allow paper claims

If you need more information about paper claims, refer to [Paper Claim Research (Submissions, Locating, Rejections and Reimbursements) (059668)](https://thesource.cvshealth.com/nuxeo/thesource/#!/view?docid=4e81c6b3-9feb-442a-b625-508abf839729).

**For Medicare D beneficiaries:**

* Medicare D SSI EGWP members can submit prescription claims using the online tool. Refer to [Caremark.com – Prescription Reimbursement Claims (Commercial Clients) (021490)](https://thesource.cvshealth.com/nuxeo/thesource/#!/view?docid=54a38024-1554-4f79-b741-7a24347df7d3).
* Remaining Medicare D members can submit prescription claims using the online tool.

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| Submitting Claims Through Desktop/Mobile Site/Mobile App |

Provides reliable, trackable, and efficient modes for CVS Caremark plan members to submit member-paid prescription reimbursement requests online via Caremark Web Portal (Caremark.com), Caremark Mobile Web (Safari, Samsung Internet, Firefox for Android etc.) and Caremark Mobile app (iOS and Android). Turn-around time (TAT) for submitted online claims is within 14 business days.

Perform the steps below to submit a claim through Desktop/Mobile Site/Mobile App:

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| **Step** | **Action** |
| **1** | **Sign in** on Caremark.com (desktop or mobile site or mobile app). |
| **2** | Select the Pharmacy Benefits drop down and select Reimbursement Claims.    Click to select **Submit prescription claim**. |
| **3** | Click the radio button to select the person for whom the claim is being submitted.    If Family member or dependent option is selected, a list displays with options for which family member or dependent.    **Note:** The member is given a list of items/information that is needed before proceeding: |
| **4** | Verify Personally Identifiable Information (PII). The member needs to verify their address and phone number. |
| **5** | Answer the initial questions regarding the member’s claim on the next page.  **Note:** If a member selects **Yes** to the second question asking if the medication was purchased outside the U.S., the member is not prompted or required to enter the pharmacy information when submitting a foreign paper claim. |
| **6** | Click the radio button to select the type of medication. Then click **Continue**. |
| **7** | Type the information from the member’s pharmacy receipt. The Member is prompted to add basic information from the pharmacy receipt and click **Search**. |
| **8** | Click to select the Pharmacy from the search results.    If the member is unable to find their pharmacy, they can type the pharmacy manually. |
| **9** | Type the National Drug Code (NDC). Then click **Search**.    If the member cannot find the medication using the NDC, they can type the drug manually. |
| **10** | Type required information from the prescription receipt. Then click **Continue**. |
| **11** | Type information about the prescriber. Then click **Search**.    Click Select to choose the prescriber from the search results. |
| **12** | The member has a chance to review the information that has been entered up to this point. If the member needs to edit, they are presented with an edit link at the far right of the page. |
| **13** | Attach the pharmacy receipt. |
| **14** | The member is presented with the opportunity to add comments to their claim. |
| **15** | The member is presented with a final review of the claim before submitting. If the member has another claim, they can begin that process by clicking **Add another prescription claim**. |
| **16** | The member clicks **Continue to submit claim** to submit the claim. A Confirmation page will populate. |
| **17** | Members can track their claims by doing the following:  Select Track submitted claims. |
| **18** | The Track Submitted Claims will be display. |
| **19** | Additional detail can be viewed by clicking View Details. |

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| Submitting Claims Through Mail via a Prescription Reimbursement Claim Forms |

Members are able to print and mail a Prescription Reimbursement Claim Form if the client does not allow members to submit claims online or if they prefer to mail their information. Only reimbursement claims submitted using the online tool can be viewed or tracked on Caremark.com (desktop, mobile web, and mobile app).

 The mailing address for submissions can vary per client.

**Note: At-home** **COVID-19 test reimbursement claim forms** that can be printed and mailed are located in the **Help Center** from the **COVID-19 Resource Center**. Refer to [Caremark.com - Forms For Print and Adobe Reader (038391)](https://thesource.cvshealth.com/nuxeo/thesource/" \l "!/view?docid=0bbf55de-6048-4d78-be0e-e40dde8f724b).

Perform these steps to access and print a **Reimbursement Claim Form**:

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| **Step** | **Action** |
| **1** | Access [www.caremark.com](http://www.caremark.com) and sign in. |
| **2** | Click **Pharmacy Benefits** tab. In the drop down select **Plan Forms**.  A screenshot of a medical application  AI-generated content may be incorrect. |
| **3** | The **Print Plan Forms** pageincludes the following links:   * Reminders and Instructions for filing a reimbursement claim. * Paper Claim Reimbursement forms are available in English and Spanish. * Paper Claim Reimbursement Form – FAQ. * Allergy Reimbursement Claim form. * Compound Claim Reimbursement form.   **Allergy and Compound reimbursement claim forms may be client specific and not available for all clients.**  A screenshot of a computer  AI-generated content may be incorrect. |
| **4** | Click **Paper Claim Reimbursement Form** and complete the required information.  A close-up of a prescription form  AI-generated content may be incorrect. |
| **5** | Print the **Paper Claim Reimbursement Form** when completed. **Mail the form to the address indicated in Step 3 of the form.**  The mailing address can vary per client.  A close-up of a prescription  AI-generated content may be incorrect. |

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| Related Documents |

**Parent SOP:** [CALL 0045 Customer Care Web Support Email Response and Handling](https://policy.corp.cvscaremark.com/pnp/faces/DocRenderer?documentId=CALL-0045)

[CALL 0011 Authenticating Caller](https://policy.corp.cvscaremark.com/pnp/faces/DocRenderer?documentId=CALL-0011)

**Abbreviations/Definitions:** [Customer Care Abbreviations, Definitions, and Terms Index (017428)](https://thesource.cvshealth.com/nuxeo/thesource/#!/view?docid=c1f1028b-e42c-4b4f-a4cf-cc0b42c91606)

**Index:** [Caremark.com - Work Instruction/Job Aid Index (105672)](https://thesource.cvshealth.com/nuxeo/thesource/#!/view?docid=8a2da44a-6336-454d-8deb-fca4a71ad69b)

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