# PeopleSafe - Determining the Reason for Contracted Medication Price Changes

[Frequently Asked Questions and Answers](#_Toc193362530)

[Process](#_Toc193362531)

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**Description:** Steps for identifying the different factors that may influence the contracted pricing of a medication with information to identify why the pricing of a medication may have changed.

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| Frequently Asked Questions and Answers |

Refer to as needed:

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| **#** | **Question** | **Answer** |
| **1** | Member is asking for a reason the cost of medication has changed/is changing. | Run a [Test Claim (004573)](https://thesource.cvshealth.com/nuxeo/thesource/#!/view?docid=59c4e7fa-4a87-43c4-89cd-5d4f8c6c3421), check the formulary and/or if a claim is already adjudicated check the pricing charged by the pharmacy.  Educate the member on Caremark.com (not all plans participate in Caremark.com, refer to the CIF) to check price estimates.  **Note:** The website performs a calculation to estimate a drug cost based upon a given manufacturer of a drug, not necessarily representative of all manufacturers of the drug and their pricing. Different pharmacies can use different drug manufacturers which can affect cost-sharing.  **Some reasons for price changes:**   * The member is in a different phase of accumulation (deductible, OOP, etc.) than they were when it was last filled. Member has an incentivization program on their plan, such as MChoice Incentivized and could switch to 90DS. * Formulary has changed on the plan, advise of alternatives and/or review CIF for possible Tier Exception. * Medication being run for a different DAW code.  **Example:** If prescriber submits Rx as DAW 1 (brand only), pharmacy must run it that way. * The pharmacy was using a copay card/coupon that has since expired (often members can apply for a new copay card). * Member is getting a different dose/strength, amount, day’s supply, manufacturer, or type. **Examples:** Member was getting tablets, now getting capsules. Member was getting 10mg, now getting 20mg. Member was getting 30 DS, now getting 90DS. * Supply and demand for medications causes the price to increase (think of this like rising gas prices). * Medication is no longer a covered medication on the Affordable Care Act. **Example:** Atorvastatin is covered under the ACA only until the member turns 75. |
| **2** | What are Contracted Rates? | The pre-negotiated cost of the medication using the member’s insurance.  Refer to [Customer Care Abbreviations, Definitions and Terms - C (051667)](https://thesource.cvshealth.com/nuxeo/thesource/#!/view?docid=82474eaf-9267-4d49-b352-1ce9b8a78cff). |
| **3** | How do I know if the price is correct that I am being charged for my medications? | Run a Test Claim, check the formulary and/or if a claim is already adjudicated check the pricing charged by the pharmacy.  You can also educate the member on Caremark.com, where they can run their own price estimates and review the pricing for paid claims on their plan. |
| **4** | Is there another pharmacy that I can use where the medication cost is less? | Run a Test Claim at alternative pharmacies.  You can also educate the member on using Caremark.com to check pricing at their choice of in-network pharmacy. |

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| Process |

The contracted rate for medication could change depending on factors in the market, see [Question 1](#_Frequently_Asked_Questions) above.

Perform the steps below:

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| **Step** | **Action** | |
| **1** | Review the **Account Balance** screen for accumulators: Deductible, Maximum Out of Pocket (MOOP), and/or Maximum Allowable Benefit (MAB). | |
| **If price change was…** | **Then…** |
| Due to an accumulator | Advise the member accordingly. |
| Not due to an accumulator | Proceed to Step 2. |
| **2** | Review the **Plan Summary**, **CIF** and run a [Test Claim (004573)](https://thesource.cvshealth.com/nuxeo/thesource/#!/view?docid=59c4e7fa-4a87-43c4-89cd-5d4f8c6c3421) to determine the following:   * Plan changes affecting copay (review the day the PBA - Plan Benefit Attribute went into effect). * Date range for the plan year (calendar vs. mid-year) and if it has reset. * Member moved to different plan.   **Example:** Active to retiree, indicated by a different client code or claim adjudicated under a different plan (Review the Prescription Details screen to determine the plan where it adjudicated).   * Maintenance plan (such as Maintenance Choice) and out of grace fills, etcetera. | |
| **If price change was…** | **Then…** |
| Due to one of the above factors | Advise the member accordingly. |
| Not due to the above factors | Proceed to the next step. |
| **3** | Review the current claim/s vs. the prior claim/s and determine if the contracted rate has changed and/or the medication has changed.  **Example:** Different manufacturer, dosage, type (capsule versus tablet, etcetera.), Days’ Supply (DS), quantity, etcetera is different. | |
| **If price change was…** | **Then…** |
| Due to one of the above factors | Advise the member accordingly. |
| Not due to the above factors. | Proceed to the next step. |
| **4** | Do you know if a **Manufacturer Coupon, Discount Savings Card,** or **Caremark Cost Saver Program** was applied to your previous purchase of the medication? This information is found on your receipt. | |
| **If…** | **Then…** |
| Yes, a manufacturer coupon or discount savings card was applied | Please follow up with your local pharmacist about the coupon that was applied. **Note:** Often members can apply for a new copay card if the one that was being used has expired. |
| Member Does Not Know  OR  States a manufacturer coupon or copay savings card was NOT applied | Review prior claims to determine likelihood a coupon/copay card was used.  **Note:** If the member states they have been charged less each time, but we see a higher copay than they state they have been paying, it is likely a coupon (or copay card) was applied.  **Example:** Member states they have only paid $15 each fill in the past. Upon review, you see the copay on the plan has been $90 each fill in the past, which is the same as their current fill. It is likely a coupon was applied.   * Often pharmacies apply a coupon and do not inform the member.   It appears each time this medication has been processed; it has been at a higher price. Often pharmacies use coupons and may not explain they are using one for you. Please follow up with your local pharmacy. |
| Yes, the Caremark Cost Saver Program was applied | Caremark Cost Saver is a program intended to make lower prices available to members on certain covered products. This is a partnership with a discount vendor while applying payments to the member’s accumulators.  **Note:** Member **can** opt out of the Caremark Cost Saver Program if request. Refer to the [Caremark Cost Saver Program (060360)](https://thesource.cvshealth.com/nuxeo/thesource/#!/view?docid=f389b4bb-3337-4b32-af6f-556d7fa03a78). |
| **5** | If you are still unable to determine the reason for the price change, contact the Senior Team for assistance. Refer to [When to Transfer Calls to the Senior Team (016311)](https://thesource.cvshealth.com/nuxeo/thesource/#!/view?docid=9eef064d-c7d7-42f7-9026-1497496b4d51). | |

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| Related Documents |

[Log Activity/Capture Activity Codes (005164)](https://thesource.cvshealth.com/nuxeo/thesource/#!/view?docid=bdac0c67-5fee-47ba-a3aa-aab84900cf78)

[PeopleSafe - Account Executive Consideration Task (AE Task) (027240)](https://thesource.cvshealth.com/nuxeo/thesource/#!/view?docid=497dcdb2-2c97-4a3a-afe9-1fa95f6dd734)

[PeopleSafe - Corrections to Deductible, MOOP and MAB (CDH Accumulations Task) (006603)](https://thesource.cvshealth.com/nuxeo/thesource/#!/view?docid=0bb85a30-90e4-4d8d-beb4-3e090d3e9a94)

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

**Parent Document:** [CALL-0049 Customer Care Internal and External Call Handling](https://policy.corp.cvscaremark.com/pnp/faces/DocRenderer?documentId=CALL-0049)

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