# Paper Claim Calculations

[Contracted Rate Less Co-Pay Scenario](#_Toc173916196)

[Submitted Price Less Co-pay Scenarios](#_Toc173916197)

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**Description:** Explains the most common ways plans reimburse for approved paper claims.

**Note:** Review the Paper Claims Section in the Client Information Form (CIF). Depending on the plan (there might be plan specific exceptions), reimbursement will generally be processed by one of these methods.

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| Contracted Rate Less Co-Pay Scenario |

The member is reimbursed up to the amount the plan (client) would have paid if the prescription had been processed through the member’s insurance. The member is reimbursed based on the contracted rate, minus the copay (member’s responsibility).

**Example:**

* Member pays out-of-pocket $100 for their medication.
* Contracted rate of the medication is $50.
* Member copay is $20.
* Contracted rate (not the submitted price) minus member’s copay is what the member will be reimbursed.

**Example:**  $50 - $20 = $30. Member is reimbursed $30.

**Note:** In some instances, a member might have an approved paper claim and will be reimbursed a small amount or no reimbursement.

**Scenario:** Contracted rate for medication is $20. Member’s copay is $20.

**Example:** $20 - $20 = $0. No reimbursement.

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| Submitted Price Less Co-pay Scenarios |

The member is reimbursed the listed percentage of the submitted price (not the contracted rate), minus the copay (member’s responsibility). Plans might cover different percentages of the submitted price, such as 80% or 100%.

Reference the following scenarios as needed:

**Scenario 1:**

* Plan coverage (Paper Claim policy) has a 100% submitted price less the co-pay.
* Member paid a total of $100 out-of-pocket **and** should have a co-pay of $20.

**Example:**  $100 - $20 = $80. Member is reimbursed $80.

**Scenario 2:**

* Plan coverage (Paper Claim policy) has an 80% submitted price less the co-pay.
* Member paid a total of $30 out-of-pocket **and** should have a co-pay of $20.

**Example:** 80% of $30 = $24. $24 - $20 = $4. Member is reimbursed $4.

**Note:** In some instances, a member might have an approved paper claim, but with no reimbursement.

**Scenario 3:**

* Plan coverage (Paper Claim policy) allows the full 100% submitted price less the co-pay.
* Member paid a total of $18 out-of-pocket with a $20 co-pay.

**Example:** $18 (paid) - $20 copay = $0. Since they paid less than their co-pay, there is no reimbursement.

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| Related Documents |

[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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