# **Paper Claim** **- Determining if Appropriate**

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**Description:** Information to research or ask for to determine if a paper claim is appropriate for the member to request reimbursement for a medication that was paid for out-of-pocket. It includes additional options that may be appropriate to recommend to the member.

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| Process |

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.**

* Paper claims should be one of the last things we consider after looking at other options.
* Paper claims will require “homework” for the member, and reimbursement does not always cover all costs the member paid, refer to [Paper Claim Calculations (059749)](https://thesource.cvshealth.com/nuxeo/thesource/#!/view?docid=b470d4d1-008b-4fb2-a06c-ca8d2ff89195).
* A paper claim is only appropriate when the member has truly paid “out-of-pocket,” and the plan would have accepted the claim.

Before discussing filing a paper claim, perform the following:

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| **Step** | **Action** |
| **1** | Review the CIF to determine if the plan allows that type of paper claim, and/or if the plan has specific paper claim requirements. |
| **2** | Run a Test Claim for the prescription for the pharmacy where it was filled and the date it was filled. |
| **3** | 1. Review the member’s plan (or plans if the member has more than one plan) in Compass or PeopleSafe to determine if a paid claim has been processed for the prescription.   **Note:** A rejected claim is not a valid reason for a paper claim. Paper claims are only accepted when the plan would have shown a paid claim. The reason for the rejection needs to be resolved before discussing coverage of the prescription. **Example:** A medication requires a Prior Authorization for coverage. The member would need to have an approved Prior Authorization (PA) on file before the plan would cover the medication. Requests for reimbursement would only be appropriate for prescriptions filled and paid “out-of-pocket” during the time period that the PA was in effect on the plan.   1. Review the member’s plan (or plans if the member has more than one plan) and the [Paper Claim Viewer (042396)](https://thesource.cvshealth.com/nuxeo/thesource/#!/view?docid=531bdb49-5d03-46f6-83e6-4fdc0699cef4) for PeopleSafe users or [Compass – Identifying Paper Claims (050034)](https://thesource.cvshealth.com/nuxeo/thesource/#!/view?docid=c281dde6-a86e-451a-8828-9f2b98c17bb9) for Compass users to determine if a paper claim has already been processed for the prescription. |
| **4** | Ask probing questions to determine if the prescription may have been covered by another insurance or program.  **Note:** While programs such as GoodRx are not insurance, they process similar to insurance. A member cannot use a program such as GoodRx and be reimbursed for the claim. Only true “out-of-pocket” purchases of prescriptions are eligible for possible reimbursement. |

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| Additional Options When a Paper Claim is Not Appropriate |

If a paper claim is not appropriate, these additional options may be helpful for the member to resolve the reason a paper claim is not currently appropriate, or for the member to consider other solutions for financial assistance.

**Plan Design Rejections:** Research to determine if the reason for the rejection can be resolved.   
**Example:** A Prior Authorization or Appeal could be submitted and requested to be backdated. If approved and backdated, the member may be able to then submit the paper claim.

**Non-plan design rejections**: Refer to [Member Cannot Afford Medication (Alternatives and Financial Assistance) (026963).](https://thesource.cvshealth.com/nuxeo/thesource/#!/view?docid=62aa67ac-8298-4fa1-b1ba-fda383d15b4c)   
**Example:** The plan does not allow paper claims (or that specific type of paper claim, such as out-of-network paper claims).

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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" \t "_blank)

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