



## RESIDENT FREQUENTLY ASKED QUESTIONS (FAQS)

### M Chest Institutional Pharmacy Group, LLC ( “MChest”)

#### **How does MChest fill my prescription?**

- After receiving a prescription from your physician, the nursing staff at the facility either calls or send a fax with the prescription to the pharmacy.
- A licensed pharmacist reviews the request to check for:
  - o Drug Allergies
  - o Interactions with other medications or food
  - o Duplicate Medications
  - o Proper Dosing
  - o The prescription is then filled, followed by several more quality checks.
  - o A member of our staff delivers your prescription to the facility on the same day.

#### **Why does the pharmacy send a smaller supply of medication?**

- Long term care pharmacy regulations generally recommend a 30-day supply over larger quantities of medication for safety reasons.
- The quantity dispensed is determined by your physician.

#### **How will my drug charges be covered?**

- There are several common methods of payment/coverage for prescription medications in the long term care environment.
  - o Medicare and Medicaid provide some prescription drug coverage in a long term care setting.
  - o Private insurance (for example, Blue Cross/Blue Shield) may provide coverage
  - o Long Term Care Insurance
  - o Prescription drug cards (including Medicare D plans)
- Private Pay: If you are not covered by any of the above programs, MChest will send you a monthly statement. You are responsible for paying 100% of this bill by the due date.

#### **How will my drugs be covered if I have applied for Medicaid, but I am not yet eligible?**

- Once you have applied for Medicaid, your payment status is considered “Medicaid Pending”. During this time, MChest will send you or your responsible party a monthly statement of drug charges for payment.
- Please keep us informed of your application status so that we can re-bill if appropriate.
- Once you have received Medicaid eligibility, MChest will bill Medicaid directly for the majority of your drugs.
- You or your responsible party will receive a billing statement. Those products that are not covered by your Medicaid program or your long term care facility will be billed to the residents account.

#### **Why are some items billed to me at full price when I have insurance?**

- **Accurate Billing-** There are times when prescription insurance coverage changes. MChest uses your most recent insurance information to bill accurately. Please contact a billing staff representative as soon as possible with changes and updated information.



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- **Over the Counter Medications** Many insurance plans do not cover over the counter (non-prescription) items. Exceptions are commonly made for diabetic supplies.
- **Deductibles** Some insurance plans require an annual deductible be met before the insurance will pay. Until you meet the deductible amount, your bill will reflect the pharmaceutical expenses that are your responsibility.
- **Approval Process** Many insurance plans have a prior authorization review and approval process to determine if and how certain medications will be covered. The physician is responsible for obtaining prior authorization. M Chest also makes an effort to assist.
- **Restrictions** Many insurance plans have restrictions that include, but are not limited to, the quantity that can be dispensed for refill orders. M Chest follows time guidelines when filing claims. Sometimes an insurance plan will not cover the medication if it is dispensed or billed outside these parameters. In some cases, you may be able to file a claim for direct reimbursement.
- **Mail Order-** Some prescription plans are limited to mail order only. When there is a mandatory mail order requirement, the insurance company will not be able to pay M Chest to dispense your medications.
- **Medicare Part D Coverage Gap (Donut Hole)** - The Donut Hole refers to a period of time during the coverage year when the patient is responsible for paying all drug costs according to Part D Plan negotiated rates. Please contact your Part D plan carrier for information specific to your plan, or visit the CMS website at [www.cms.hhs.gov](http://www.cms.hhs.gov) for additional information.

If you have questions or concerns about your pharmacy billing, please contact us at **855-MCHEST1 (855-624-3781)**. We will be happy to assist you.