

CY 2011 AAH/HMO Closed Complaints regarding pharmacy – 19*

#	Filed by	Reason for complaint
14	Insured/Member	<ul style="list-style-type: none"> (2) Carrier requiring use of mail order drugs (1) Pharmacy dropped from network (1) Deductible charged again after Mbr. changed drug plan mid-year (1) PBM paid \$1400 to Mbr instead of pharmacy. Mbr cashed check & can't get refills. (1) Mail Order Errors – ERISA plan. (1) Alleged claim payment errors (not justified) (1) Rx Denied – no mental health coverage (3) Quantity. override <ul style="list-style-type: none"> (1) delay in approving – Medicare + D (2) Override denied (1) Preauthorization process – FEHBP (2) Complaints against pharmacy/pharmacist - referred to Pharmacy Board.
5	Pharmacist	<ul style="list-style-type: none"> (2) Service/Transaction fee. – ERISA plan (1) Transaction fee – No response to TDI's request for name of Insurer/HMO, patient's name, group policy and Mbr ID#. (1) Contracted reimbursement less than drug cost – Self-funded municipal gov. plan (1) Refund requested on overpaid claim – ERISA plan

AAH/HMO Pending Complaints regarding pharmacy – 0*

*As of 9-30-2011