

Navigating life together

Chronic Medications Upload

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Assistance Services – Claims Department

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Outlines

 The aim of the project is complete automation of the process of dispensing chronic medications.

"Win-Win-Win Situation"

- The insured members have an easy access to their medications throughout the month in any contracted pharmacy in a paperless process
- The policy holder is assured that utilization is monitored
- MetLife has better control of the process to ensure delivering timely service to the eligible and minimize abuse



Where to Submit?

Three reception points:

- Doctor on Site: DOS is responsible for receiving, revising, archiving, sending and confirming requests
- 2. Policy Holder HR personnel: In accounts not visited by DOS
- 3. Account Manager: MetLife's Portfolio Management team could assist in providing and follow-up of requests.
- N.B. An insured member has to go through official channels and is not allowed to personally send his/her request.



How to Submit

The collected requests should be sent in one mail to the following e-mail addresses:

egyptassd@metlife.com

For tracking and follow up purposes, the subject of the mail should include: Policy Number, Policy Name and the Effective Date

Example: 44935 – Vodafone Egypt – Chronic May 2017



When to Submit

The requests are to be submitted in the first 15 days following the effective date of the policy:

- For posts effective on the 1st of the month, the request is to be sent up to the 15th of the previous month.
- For posts effective on the 15th of the month, the request is to be sent up to the 30th of the previous month



What to Submit: DOS:

- The site doctor is required to collect the prescriptions and enter the data in the uploadready template.
- The sheet is revised by the chronic medications supervisor and sent to the dedicated approvals officer.

Group No.	Certificate No.	Member Name	Diagnosis(s)	Medications Prescribed	Effective Date	Renewal Date	Dose required/day
12345 00000	123	XYZ	DM	Glucophage XR 1000	15/5/2017	14/11/2017	2 tab/day
			Htn.	Diamicron MR 60	15/5/2017	14/11/2017	1 tab/day
				Milga	15/5/2017	14/11/2017	1 tab/day
				Concor 5 plus	15/5/2017	14/11/2017	1 tab/day



Policy Holder (HR department)

The best way to submit requests is as follows:

- 1. A scanned copy of both the prescription and ID card (see figure)
- The copy should be colored and clear
- 3. Prescribed by a specialized consultant
- 4. Prescription should include name, date and diagnosis
- 5. Prescription should be recent (not older than 3 months)
- 6. Concentration and dosage of all drugs should be included





Policy Holder (HR department)

- The chronic medications supervisor will receive the requests sent by the HR and fill them in the upload-ready template shown above and send them to the delegated approvals officer.
- The approvals department might require investigations to support the diagnosis (e.g. laboratory or radiological results). It is best to provide them with the initial request.
 Otherwise, a mail will be sent to the reception point (DOS, PH or FSR) with the remaining requirements.
- If the insured member already has an uploaded prescription and needs to add another one (for a different diagnosis) to the already existing post, both prescriptions should be scanned together and sent. If a prescription is sent alone, it will automatically be considered a replacement of the existing post.



Confirmation

Confirmation of upload is sent to the reception point

(DOS, HR or Account Manager)

2 days before the effective date of the post.



1. Request cannot be uploaded

Reasons for this are:

- a. Limited waiver/pool for pre-existing conditions. In such case, the claims/approvals departments advise that the medications should be dispensed on monthly basis.
- No waiver/pool for pre-existing conditions. In such case the treatment will not be covered.
- Certain types of drugs are dispensed on monthly basis by default, such as:
 Chemotherapy / Hepatitis treatment / Antenatal Care (if covered within the policy) /
 Hormonal Therapy
- d. Diagnosis is not covered



2. Insured member cannot find one or more items of his prescription

Reasons for this are:

- a) Drug is rejected
- b) Drug is illegally imported
- c) Drug is not indicated in the case/diagnosis
- d) Drug is indicated but not for chronic use
- e) Drug is a duplicate: if the same drug or a member of the same drug class is found in anoth prescription. The chronic team will upload the most recent item.
- f) The prescription has been updated and the item has been removed or replaced
- g) Drug has been dispensed manually in an acute prescription
- h) Drug is not available in the pharmacy or the market



3. Dispensing monthly medication in advance

This is not allowed for the following reasons:

- a) Regulatory
- The insured member could be terminated from the policy
- Increase risk of waste, fraud and abuse
- b) Medical

Drug, dose or concentration could change according to improvement / deterioration of the condition

c) Inaccurate reporting in both claims and utilization reports



4. Post dropped from I-Care system

- Prescription was only uploaded for 3 months or 6 months and needs to be updated
- I-Care system update occurring on the last day of the month
- If an insured member did not dispense his/her medications for more than a month, the system automatically drops the post
- The prescription was replaced by a more recent one



5. Contract Expiry

If the remaining period till expiry of the contract is less than 28 days,

the insured members have to obtain manual prescriptions, claim forms ± approval to dispense the remaining period of the month.





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Thank You!